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ABSTRACT

One of 10 documents developed for preschool programs for handicapped children, the manual focuses on a transdisciplinary approach to developing community awareness and interagency cooperation. The program provides concrete methods for helping an agency understand a community's character and develop a tailor made awareness program. An introductory chapter describes the guide, discusses community awareness and interagency cooperation, and charts the recommended four step process. Each of the following four chapters deals with one of the steps: (1) hiring and training staff; (2) investigating the community (including identifying potential audiences and listing agencies to contact); (3) planning (including timelines, procedures, and material development); and (4) implementing, evaluating, and replanning. A major portion of the document consists of 47 examples, including a timeline for community awareness activities, a telephone contact format, a referral form, an assessment of parental needs, a followup questionnaire, a materials evaluation questionnaire, and the agenda for a parent awareness workshop. (DB)

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A GUIDE FOR CREATING COMMUNITY AWARENESS

AND DEVELOPING INTERAGENCY COOPERATION

Preschool Program: A Regional Demonstration
Program for Preschool Handicapped Children

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PREFACE

Since 1976, the Putnam/Northern Westchester Board of Cooperative Educational Services, known as BOCES, has been providing programs for handicapped children. These youngsters reside in eighteen different school districts (in a two-county area) in southern New York. Their homes are in rural, suburban, and urban areas, and their families represent all levels of the socioeconomic spectrum.

The variety of their backgrounds is the primary reason that BOCES became so involved in the activities that form the subject matter of this book. To meet our responsibility for the handicapped children in this diverse area, we had to initiate strategies for informing the community of our existence and of the services we could provide for special children. Only with an intensive advertising program could we hope to reach, bring in, and help the more isolated segments of this population.

In the beginning (1977-78), we had help in the form of the "Child Find" program created under Public Law 94-142. The basic goals of that program were 1) that child-service agencies must make the community "aware of their existence, and 2) that the various agencies serving the special children and their families in an area can provide more comprehensive services more efficiently if they work together rather than in isolation.

In the years since 1978, we have elaborated upon these basic ideas. We have created a program, which is explained in this guide, that includes very concrete methods for helping an agency staff understand a community's "character" and with that knowledge

develop an awareness program that is tailor made.

We have also fashioned a program that depends upon cooperation with other agencies to provide services. Perhaps because of the way we have structured our own intervention program for children, we have been in a better-than-average position to plan for this cooperation. We use what is called a "transdisciplinary team" to provide a range of services. This team is composed of a variety of professionals who act in concert (not separately) in evaluating children and offering guidance to each other. The methods we have developed to encourage attitudes of sharing and teamwork, rather than interdisciplinary competition, among these professionals have been translated to our interagency cooperation activities. We have approached the many agencies and professionals in our area with the philosophy that the needs of special children are best met when we share our knowledge with others and they share theirs with us. Cooperation is an inevitable product of this philosophy.

The program you are about to examine involves hard work. It takes two to three years to implement. It involves developing materials, procedures, and timelines. Yet, this guide provides enough examples (in Part II) to speed some of the work, and it offers a sturdy framework which we have found more than adequate for developing awareness and working cooperatively with others.

ACKNOWLEDGMENTS

We gratefully acknowledge the cooperation of the many agencies, schools, and services in Putnam and Westchester Counties which have worked together in building a network to provide appropriate services for young handicapped children. This guide is a testimony to their dedication.

We also wish to acknowledge the assistance of the following BOCES personnel:

- Dr. Paul Irvine, Director of Special Education; and Dr. Donald Coe, Assistant Director, for providing us with many professional opportunities.
- Mary Smyth, Charlotte Sperling, Margot Nochese, Marti Brogan, and Kathy Budries, all home trainers, who generously shared their skills and offered their abilities to relate to the needs of families and work with them appropriately.

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PART I: THE STEPS

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THE STEPS

CHAPTER 1 INTRODUCTION

Why was this guide written?

First, to help service providers better meet the needs of the children and families they serve. Since Child Find, a program initiated under the Education for All Handicapped Children Act (P.L. 94-142), was dissolved, it has been up to individual agencies who serve preschoolers to develop their own methods of finding children who need special help...children who may have minor or major developmental problems that will interfere with learning and general development. Almost all the literature regarding educational services for these children concludes that the earlier help is provided, the greater its impact. In this manual, we have offered the best path we know for finding special children - making the community aware of what you can provide.

Second, this guide was developed to give service agencies a way of creating a network among themselves. Seldom is one organization able to offer the range of services that all the special children and their families within a community need; but if all who are concerned with the welfare of these people are aware of the various kinds of assistance available in the community and are capable of working together -- the needs of the "total" child can

be met. This guide offers a way of bringing agencies together and of short circuiting rivalries for "professional territory" that undermine cooperation.

Third, this manual was formulated in a way that allows readers to take immediate and concrete steps toward opening a dialogue with the community and its agencies. Samples of forms, letters, brochures, and other printed materials abound. One of the central objectives of the guide is to provide the child-care community with a resource - a how-to handbook of ideas.

Who specifically is the guide for?

Teachers, administrators, general staff members, and field caseworkers in agencies that serve children and families. A partial list of the agencies that may profit from this manual are: pre-school programs; local public and private school personnel (e.g., guidance counselors, social workers, nurses); mental health agencies; public health agencies; recreational organizations; public and private special-services clinics (e.g., speech therapy, physical therapy); and library systems.

What exactly is community awareness?

It is a situation in which the population of a small geographic area (a town, a neighborhood, a rural region) is aware of the services for children and families that are available to them within that area. We believe this state of knowledge can be accomplished only through planned advertising and other ongoing public-relations activities by the agencies providing the services.

What is meant by interagency cooperation?

This is the act of one or more agencies sharing information or resources with other agencies in order to provide better services to a particular child or to the children and families of the community. The form of this cooperation may be conferences, referrals, advisory tasks, etc. The goal of cooperation is not only to provide more complete services but also to avoid duplication of services.

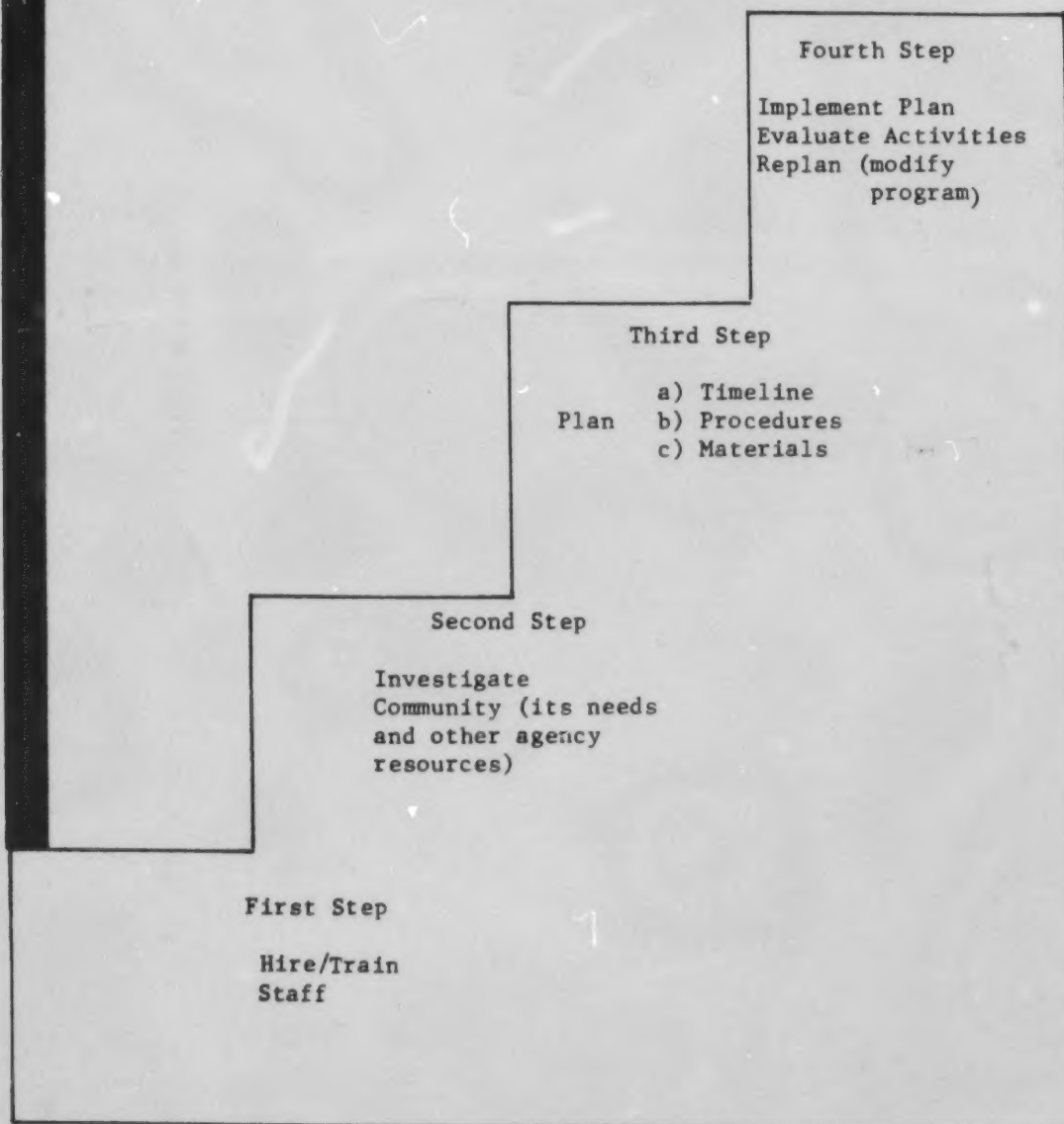
How can awareness and cooperation be promoted?

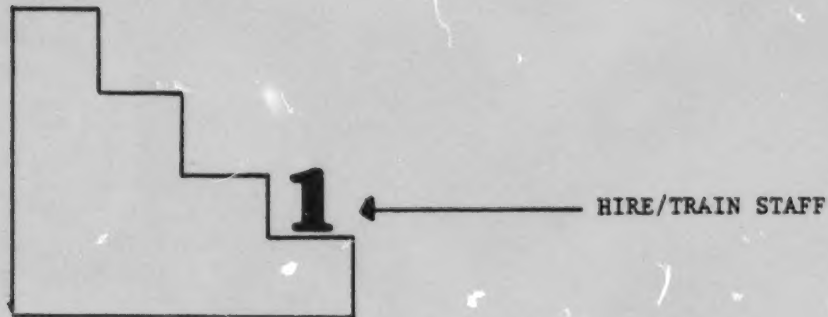
Figure 1 shows the steps in a plan that we have used to make the community aware of our services and to build bridges of cooperation between us and other agencies. The diagram outlines the steps that a new agency may use to build a program from the ground up. Some agencies will already have a staff and sufficient knowledge of the community to begin planning (Third Step) - but, they will probably still need to train the staff (First Step) to some extent for these new activities.

It is important to note that any of these steps may need to be repeated at various points along the way. A community is always changing (new people, new businesses, new agencies); and for that reason, the Second Step may need repeating several times in the course of an agency's life. With significant community changes, some new planning (Third Step) will be necessary, which means that new evaluative activities (Fourth Step) will also have to be determined. So the diagram, in a sense, represents a cycle of activities - each of which needs repeating when there is a significant change within the agency or community.

In the proceeding chapters, each of the four steps is discussed. Your agency may need to modify some of the information and materials presented for your situation. Feel free to do so. Just remember that an effective program is a planned program.

FIGURE 1
A PLAN FOR PROMOTING COMMUNITY AWARENESS
AND INTERAGENCY COOPERATION





CHAPTER 2

FIRST STEP: HIRING AND TRAINING STAFF

Before any planning is done, there should be a community awareness staff. It should be the responsibility of this staff to develop plans for reaching the community. If staff members make the plans, they are more likely to be committed to the approach they are using, and they are more likely to present to the community a consistent image of the agency's services and philosophy.

But who hires the staff? Who trains them? What should be their backgrounds? How many staff members are needed? There are questions, of course, which may require different answers in different agencies. Generally, it is safe to assume that there will be an administrator who is charged by his or her agency with finding and preparing personnel for community-awareness responsibilities. Because the new staff will have to make plans and develop materials, they should be hired at least one month before awareness activities are begun.

Among the first decisions he or she will have to make is: how many people are needed? Ideally, at least one person should have as his or her total function the development of community awareness. Realistically, however, because of financial limitations, the job will usually have to be spread among several staff members. One

of the most important of the administrator's tasks is to help clarify who is responsible for these activities.

The administrator must also make sure that the people chosen for this job are qualified by temperament, training, and other factors to be effective. Generally, a community-awareness worker should have experience in a variety of disciplines. Sample 1 lists some of the personal traits the administrator should look for when hiring community-awareness workers.

Finally, the administrator must ensure that an adequate training regimen is developed. This should be designed to encourage a genuine commitment among personnel to the goals of the agency. Two of the best ways to ensure a commitment are:

1. Make sure staff members understand the goals.
2. Make sure that staff members understand that they play an essential role in meeting the goals.

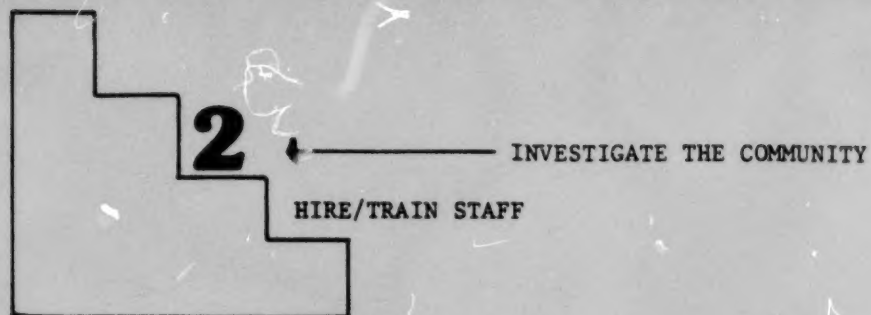
The following activities will help prepare community-awareness personnel to represent the project. Staff members, supervisors, clinicians, administrators, and others in the agency may play a part in these training procedures.

1. A tour of the facilities. By meeting personnel and gaining knowledge about the physical plant, the new staff is in a better position to explain services to other agencies and the public.
2. Exposure to printed and audio-visual materials. Especially if your agency is part of a larger agency (such as a hospital, school district, or social services department), the new

staff must come to understand the way your agency functions within the larger organization. Generally, printed and other materials on the total organization's services will help fill in this knowledge.

3. Attendance at program workshops. The new staff will on occasion have to "sell" workshops to individuals and agencies. To sell, they have to know the product.
4. Knowledge of available services (diagnostic, programmatic, consultative). To encourage other agencies to refer appropriate clients, the community-awareness staff needs to know about the agency's services and the people within the organization who offer them.
5. Information about staff. The new staff should talk to the people who deliver services to the children and families in order to understand their philosophies, the procedures and materials they use, and program key elements.
6. Role-play exercises. Dealing effectively with a variety of perspectives and people takes practice. Sample 2 suggests a number of situations to consider.
7. Familiarity with the community. While part of the new staff's responsibility will be to learn what is available in the community (Second Step of Figure 1, page 4), the administrator should plan a workshop to introduce the new workers to aspects of the locale which are part of the agency's present knowledge.
8. Conveying information to different audiences. The way an

agency's services are introduced to various audiences should be different - because diverse groups will need different services from the agency. For example: a mother should be approached differently than a physician. Existing staff or consultants can work with the new community-awareness workers in developing procedures for approaching different audiences. This work is not only "training" for the new staff, but it is also "planning" for the situations they will face in the future. Sample 3 suggests ways of approaching mothers at a well baby clinic. Sample 4 offers a method of conveying program information to doctors.



CHAPTER 3
SECOND STEP: INVESTIGATING THE COMMUNITY

This is really the first step in the planning process and the first activity that the new staff is solely responsible for. Before the community is made aware of an agency's services, the agency should make itself aware of the community's needs and the community's resources. It is very difficult to advertise a product or service effectively if the needs of the target group are unknown.

Identifying Potential Audiences

The first order of business is to come to know the community as a whole. This means geographically, demographically, philosophically. What do people think politically? Where do they congregate? From this type of research, you will come to know the kind of "ad" campaign to develop: what topics to address, where to leave posters and flyers, etc. Sample 5 explains how this exploration may take place. Since community research should be an ongoing activity - one that is continued even after you have begun to implement your plan - this sample includes suggestions for leaving flyers and posters as you investigate. However, the first time you explore - you will not have materials to leave.

From this initial exploration, you will have learned to some extent the kind of audience you want to reach with your awareness campaign (general community, other agencies, legislators, local education agencies, early childhood education agencies, mental health

clinics, colleges and universities). You will also have gained some idea of the people who may be able to help you in awareness goals. One of our workers, for example, was driving through town and happened to see a sign for the Dominican Sisters for the Sick and Poor. When she entered the home, the Sister on desk duty explained that most of their order are visiting nurses. She was delighted to hear about the start of a new program for children in her community. She offered the community-awareness worker a cup of tea and a footstool for her weary feet. As they chatted and compared services, the Sister began to think of several families with children that she felt needed screening.

Listing Agencies to Contact

In this initial work, it is important to compile a list of the agencies in the community -

1. who serve a similar population;
2. who serve other populations;
3. who may be willing to refer children;
4. who may be willing to advertise your products and services.

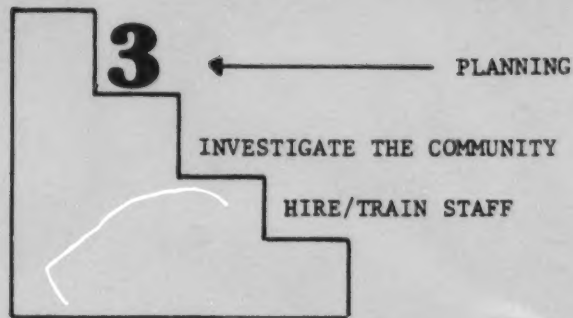
A contact list may be compiled by investigating a number of sources, such as: State Education Department libraries of child-find literature, area associations for the handicapped, day-care-council listings of facilities in the area, central county agencies, local newspapers, yellow pages of local telephone books.

Once this list is prepared, another list of potentially cooperating agencies should be compiled - complete with the name of a contact person, his/her title, address, and phone number. This list can eventually

be used for mailings. This task may require several workers re-searching specific topics over several days. The final list should be organized by topic, such as those shown in Figure 2.

FIGURE 2
DIFFERENT AGENCIES ON WHICH INFORMATION
SHOULD BE OBTAINED

Department of Social Services	Women's Centers
Special Education Teachers	Day Care Centers
Libraries	Well Baby Clinics
Head Start Centers	Nursery Schools
Hospitals	Police Department
Mental Health Clinics	Home Aid Association
Newspaper Editors	Visiting Nurse Associations
Convents	Colleges and Universities
PTA Presidents	Speech and Hearing Clinics
Churches	Community Action Programs



CHAPTER 4 THIRD STEP: PLANNING

Planning can make the difference between a poor image and a good image in the eyes of the community and other agencies. Therefore, it is important to develop a comprehensive plan before making any contacts or developing any materials - even though the plan will, in all likelihood, be modified once it is implemented.

What does a comprehensive plan include?

1. A timeline
2. Procedures for - making phone contacts, visiting agencies, distributing posters and flyers, conducting workshops, keeping records of agency contacts
3. A list of contacts to be made
4. A list of materials to be developed
5. A list of workshops to be given
6. Referral procedures
7. Staff responsibilities

Now, of course, a plan may include any number of other things, depending upon the agency's needs and resources; but these are the basic things that will help an agency cover all sectors of the community and present a consistent image to its clients.

Planning Sessions

One of the key processes for developing plans is "brainstorm-

ing" or group decision-making. Once the staff has done its homework and knows what the community needs and what it has, strategies can be worked out. Each of the items listed as necessary for a comprehensive plan should be considered by the group. Planning sessions might follow this outline:

1. The leader of the group suggests a topic.
2. The staff provides input, and all suggestions are listed.
3. Suggestions are prioritized and organized.
4. A list of procedures or materials or workshops results.

Interagency Cooperation

While planning for community awareness, special time should be taken to develop the attitudes, methods of approach, and materials that will help your agency develop a cooperative relationship with others in the business of serving children and families. Special consideration should be given -

1. procedures for making contacts with agencies;
2. descriptive program materials geared to agencies (such as a client characteristics list, Sample 34);
3. workshops for other agencies on topics not in their areas of expertise;
4. materials that emphasize the different types of services you provide (not services already available at other agencies) and your desire to cooperate with other agencies.

The timeline for making contacts and delivering materials or holding workshops for agencies should be part of the overall scheduling plan discussed in the next section.

STEP 3a: TIMELINES

A comprehensive community awareness program cannot be implemented in one year in a new agency. It takes time to develop community support. It takes at least a year of providing services before there is any evidence regarding the agency's effectiveness. This evidence can be an important part of the materials the agency uses to garner support and make the community aware of the quality of its services. Finally, it takes a while for any agency to find its niche in the service's structure of the community.

Therefore, the plan included in this guide covers a two-year period for developing community awareness and interagency cooperation, with a third year for evaluating the effectiveness of these activities. Generally, in the first year, an agency should be intent on -

1. defining the services it will offer;
2. telling the community what services are available at the agency;
3. communicating the need for these services to the community; and
4. differentiating its services from those of other agencies.

In year two, the awareness effort should -

1. show evidence of the agency's effectiveness;
2. expand the services offered in the first year (e.g., workshops);
3. reach a larger section of the community.

During the planning period for year one, all of the activities

in the First and Second Steps of Figure 1 (page 4) should be completed. To review, those steps included: hiring and training staff and investigating the community, which entailed compiling lists of agency locations and defining the audience for awareness activities. The initial planning dictated in the Third Step of Figure 1 and most of the procedures and many materials, should also be completed in the early months of the first year. Notice in Sample 6 (Year 1 Timeline) that separate sections are devoted to developing printed materials and workshops. In general, the following guide should be used -

Printed Materials -

- that describe program (program descriptions, rationale, client characteristics list).....in September/October
- that advertise program (posters, flyers, professional brochures, newspaper articles, visitor orientation packets, and business cards)...in January/February
- that support program (curriculum description, case studies, fact sheet).....in May/June

Workshops -

- that introduce program (general awareness).....1st Year
- that address specific topics or methodology.....2nd Year

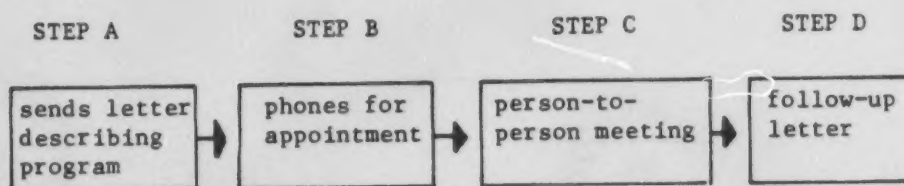
This sequence was developed on the basis of an educational service agency's normal operation schedule. It may be modified to suit other schedules.

STEP 3b: PROCEDURES

"Making contact" is the core of a community awareness program. Whether it is by phone, in person, or by mail - it makes an impression on the recipient about the agency's "expertise," goals, cooperativeness, and approach. Therefore, it is useful to have some general procedures which all the awareness staff can follow in making various contacts. In this way, the agency projects a unified image.

Initial Contacts with Agencies, Schools, Professionals

If the agency initiates a contact - especially with another agency or nursery school and sometimes with parents and other professionals - it will usually follow this sequence:



The purpose of the contact is, of course, ultimately to find more children for the agency's program and to find resources for those children the agency cannot serve. Though agency directors (whether they be in a nursery school or local education agency) seldom make referrals, it is worthwhile for the first contact to be with them

since their support can pave the way for cooperation within the ranks.

The letter sent in Step A should broach the topic of cooperation and explain your services - see Sample 7. The phone call in Step B should be used to courteously suggest a visit from you to his/her agency - you may use Sample 8 for this contact. During the person-to-person meeting, Step C, your goals are to find out what services the agency provides and to ensure the director that you will not duplicate his/her agency's services but have different resources to offer. You should end the visit by thanking the director for allowing you time. Step D, the follow-up letter, is designed to cement the air of courtesy and cooperation you projected throughout Steps A, B, and C, - see Sample 9.

After an initial visit, you should find many opportunities for contacting the agency, school, or individual. These contacts may simply involve delivering materials, or they may occur during referrals or via workshops. However they happen, you should keep a record of all contacts. Sample 10 is a log we have used for this purpose. This record will be useful, especially when you begin to evaluate and modify your community-awareness program.

Referrals

When you refer a child to another agency or you receive a child referred from an outside agency, you will be making contacts with both parents and professionals. This is an excellent opportunity to make a good impression on both groups...an impression that will encourage them to spread the word about the services your agency provides. In this section, guidelines are presented

for promoting community awareness when working with parents and other agencies during screening and assessment activities.

Parents. When families first come to your agency - before you have screened or assessed their children - it is very important that they be made to feel comfortable. When a parent first calls, the secretary should be able to give him/her specifics about your program and the qualifications of the staff over the phone. When parents arrive at the agency for the child's screening, they should receive a letter explaining what will happen on that day and what they should expect in the future - turn to Sample 11.

When the staff meets with the parents (or anyone else), they should:

1. present a good appearance;
2. be professional, but gracious - for example, they may offer coffee to and have an ashtray available for the parents;
3. introduce each other to the families by first and last name and profession;
4. ask the parents (if it is an initial interview) if they have any questions;
5. give the parents the name and phone number of one person who is present that they can contact if they have other questions;
6. tell them when they will be notified with test results, etc.

Most education agencies that serve special children also serve the needs of their immediate families. For this reason, parents may be asked to fill out a needs assessment at the time of screening. Even if the child is ultimately placed in a program other than your

own, the assessment of the parent's concerns will be useful to the agency you refer the family to - and in that sense, will improve your image with that agency. A parent assessment device is shown in Sample 12.

During initial contacts with parents, it is also useful to ascertain the names of other agencies involved with the family and obtain written permission to solicit information from those agencies regarding the case. Two-way releases from the parents are recommended so that you may share as well as receive information from the agencies. It is important to assure parents that your interest in this information lies in understanding the needs of the child and in avoiding duplication of tests and services.

Whenever it becomes clear that tests, counseling, or services from another agency for the child are indicated, give the family guidance as to the appropriate agency and offer to make the contact for them.

When these procedures are followed, the child and family are likely to receive appropriate services and to be satisfied with your agency. That's good press!

Agencies. If you have done your basic homework (developed and maintained an up-to-date list of agencies, initiated contacts, visited them so that you know what they offer, and arranged for referrals), when it comes time to send a child to others for help, your work will be easy. All you will need are referral forms and letters such as those in Sample 13 and Sample 14.

When you find that several agencies or professionals are required to meet a child's needs, it is doubly important for you to

lead the way toward cooperation. This may mean that your agency takes the responsibility for coordinating the effort.

When your agency is asked by another to conduct a screening or diagnosis, you will want to do it in a way that encourages a positive impression of your organization's services. This may mean that you will conduct the evaluation within the other agency's setting. This allows the other organization to observe the process easily and with little inconvenience. Sample 15 is an example of an on-site screening form. After the screening, you will want to review results with the host agency. Sample 16 is a format for such a review.

Workshops

These awareness activities allow you to reach a larger number of people in a shorter amount of time than is possible with person-to-person interchanges. They must be planned as carefully, however as any other contact. The most important rules for success with workshops are:

1. Plan them. Everyone who will deliver a particular kind of workshop should be involved in the planning. An outline must be developed to guide the presentation of the workshop - so that no matter who makes the presentation, it will be consistent.
2. Know your audience. Even if you are delivering a workshop consisting of general material regarding your program - it should be tailored to particular audiences; and the tailoring should be planned by the staff, not done on the spur of the

moment. Samples 17 and 18 show agendas for a general workshop tailored to parents and child-service agencies, respectively.

3. Make every workshop an awareness workshop. You should develop workshops that meet the needs of your clients and the community. For example, topical workshops on child development, managing behavior in the home, etc., will draw a specific audience that wishes to learn more about the subject being addressed. Their interest in what is being said will probably be greater than that of attendees at a workshop designed only to describe your program. Therefore, while you have them, take a little time to explain your services. Samples of topical workshop agendas geared toward "unwed mothers," "local colleges," and "parent groups" are numbered 19, 20, and 21. A sample of a workshop presentation on a topic appropriate only to other professionals in your area is shown in Sample 22. This type of presentation is often useful at conventions when coupled with samples of your awareness materials.

Materials Distribution

The procedures you use to distribute materials should be founded upon what you want to accomplish with the materials. For example, you want them -

1. to keep your agency in the public eye;
2. to assure people of the quality of your program;
3. to establish an image of professionalism and cooperativeness;

4. to inform people of what services you have to offer;
5. to encourage people to investigate your services.

Therefore, you should plan your distribution of materials to help accomplish these purposes. You will want flyers to go where they can be most easily seen by the largest number of people. You will want those who distribute the materials to make a good impression upon people they contact. Sample 23 is a procedure to follow in distributing flyers and posters. Sample 24 is a procedural letter to parents who volunteer their services to help distribute.

STEP 3c: MATERIAL DEVELOPMENT

Most of the planning guidelines suggested in Step 3b (Procedures) apply to developing materials. For example, it is very important to know the audience you are trying to reach, to avoid alienating other agencies by advertising services they currently provide, and to plan all of your materials carefully. However, there are several other general guidelines that should be observed when creating materials:

1. Label all materials with a logo or picture that will be a symbol of your project.
2. Use color (ink and paper) consistently. If your logo is pink on a brochure, it should be pink on every other awareness document.
3. Use language carefully. Avoid terms that alienate or frighten (such as "delayed"). Avoid terms that confuse (jargon).

In this section, materials will be considered under three categories:

advertising, program description, program effectiveness.

Advertising

These are materials designed to let people in the community know that your program exists. They should be simple in format, attention-getting, and widely distributed -

Flyers and Posters. Design them to attract attention from potential users of your services. Post throughout community - e.g., in shops, stores, libraries. Avoid words such as handicap and retarded, which are likely to repel parents of a special needs child. Be clear about services available. Clarify the means through which a parent can receive those services (telephone number). Use as few words as possible. See Sample 25 (Flyer) and Sample 26 (Poster).

Brochures for professionals. When there are funds for training or replication, you may wish to develop these materials for use with other agencies or individuals in the business of child services. This brochure should describe -

1. the agency's service delivery model or innovation;
2. options available in training packages;
3. the minimum/maximum number of people to be trained at one time;
4. fees (if any);
5. phone number for the program contact (staff member);
6. return coupon specifying further request for information.

Sample 27 is an example of a brochure used for a professional audience.

Business cards. Can be given out at professional meetings, workshops, referrals, and during other interactions. They can be sent to physicians, psychologists, and social workers in the area. They can be posted in libraries and supermarkets. Include a contact person's name and telephone number on the cards. Have cards professionally designed with your logo and program name. Sample 28 shows a business card used in our program.

Newspaper articles. These may be used to advertise workshops and other agency functions. See Sample 29.

Telephone book yellow pages. Just as you should use the yellow as one means to identify other agencies, they may use them for the same purpose. Sample 30 is an example of such a listing.

Program Description

These are materials for people who need to know about your program's scope and approach. Keep them as simple as possible while providing the necessary information.

Visitor orientation packet. This item should consist of a collection of the materials available from your project that are appropriate for visitors to take with them and peruse at home or office. Several different packets may be developed for different audiences - e.g., the professional brochure is appropriate for a packet given to a psychologist but not for one given to a parent; physicians probably do not need

information on training workshops, but agency personnel may want it. Typically, a packet should include descriptive material about three areas:

1. Services to children and families
2. Training and consultation
3. Community service activities

Rationale. This is a statement of the philosophy that guides the program. It should include the theoretical and empirical bases upon which the program is constructed. It is a useful handout for professionals and agency personnel as well as parents. Sample 31 is a Program Rationale.

Program descriptions. This information may take the form of a brochure or may simply be compiled on Xeroxed 8-1/2-by-11-inch pages. Ideally, the description should fit on one piece of paper; both sides may be used. Items to be included in the description are:

1. Criteria for entry into specific programs
2. Hours of these programs
3. Locations of programs
4. Services provided
5. Parental involvement
6. Fees or funding information
7. Contact persons
8. Phone numbers
9. Other (as agency sees fit)

Samples 32 and 33 are Program Descriptions.

List of client characteristics. This sort of handout is very useful for informing other agencies of your client population.

Sample 34 is a list of client characteristics.

Program Effectiveness

These materials are designed "to convince" certain elements of your audience (parents, funding sources, etc.) that the program works and is founded on sound educational principles. These materials should especially reflect a high level of professionalism. Use a good quality of paper and prepare neatly with a good typewriter!

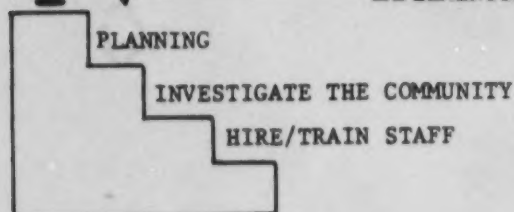
Curriculum description. This handout may be useful for programs providing direct services to children. It is one way of clarifying for others the soundness of the intervention approach your agency is using. It should include the underlying assumptions (i.e., theory, data) around which your curriculum was formulated. Sample 35 is a curriculum description to be distributed to other community agencies.

Case Studies. Outlines of several cases, stapled or clipped together, which describe the approach your agency has used in delivering services and the outcomes, is one way of explaining the methodology used by the agency in intervention. Sample 36 is a series of case studies which can be distributed to other community agencies.

Fact sheet. This item should include evaluative data regarding your agency's effectiveness during year 1. The sheet can be used in searching for new sources of funds. Its terminology should be understandable. It should include enough basic

information so that others can feel informed about your services. The data should be presented in a way that will elicit "positive feelings" about your program or agency from the reader. Sample 37 is a fact sheet.

4



CHAPTER 5

FOURTH STEP: IMPLEMENTING, EVALUATING, REPLANNING

This chapter is primarily about evaluation; so why have we grouped implementation, evaluation, and replanning together? Not because they are one activity. Each is distinct in terms of its purpose and method. However, all three activities must be considered, off and on, throughout the year. Certainly, the procedures for implementing and evaluating a community awareness plan should be carefully prepared in the Third Step (Planning). However, this does not mean putting those procedures to work is an automatic activity in which you need not think about what you're doing or be cognizant of the immediate effects your work is having in the community. Plans are guides, they are not computer systems that once programmed can run without human thought.

Perhaps one of the best methods for keeping an eye on "how things are going" during the year is to develop a diary in which you record the nonquantitative impressions: what clients said, how your flyer deliverer was received at the supermarket, how you felt about a workshop presentation, telling excerpts from letters the agency received. In this way, you will be much better prepared to tell the community about your services in a manner that gets its attention because you have constantly listened to what its constituents have been saying.

There are other ways, of course, to keep track of the effect your program of community awareness is having. In this chapter, we

will focus on when major evaluative activities should occur, how they should be executed, and what should be done with the results.

When to Evaluate

The exact timeline (with dates) for major evaluation activities should be worked out during the Third Step of Figure 1 (page 4).

We recommend the following:

1. Quantitative evaluations of -
 - demonstration-dissemination
activities.....end of year
 - referrals.....end of year
2. Qualitative evaluations of -
 - materials.....end of year
 - services.....part way through
and end of year
 - parent satisfaction.....end of year
 - workshops.....before and after
each workshop

Redesigning of needs assessments, staff and parent workshops, screening activities, and materials should occur at the end of the year and be based on the results of the evaluation.

How to Evaluate

The quantitative instruments included in this guide are the demonstration-dissemination log (Sample 10) and the referral record-keeping device (Sample 38). While others may prove useful, these forms will provide fairly complete figures of the materials sent, contacts made, and children referred to your agency or by your agency

to another organization. It is also useful to keep track of attendance at staff, parent, and other workshops. Analysis of the two forms and attendance records will reveal those segments of the community which you are reaching satisfactorily.

A qualitative analysis of a community awareness program is more difficult than the other analysis; but in a sense, it is more important. It tells the agency how people feel the activities have worked. We use the following instruments to help in this area:

1. Follow-up Questionnaire (or Call) to determine if printed materials were read and remembered (Sample 39)
2. Evaluation of Services Questionnaire - sent to area agencies (Sample 40)
3. Parent Questionnaire - to determine their satisfaction with services (Sample 41)
4. Workshop Evaluation Questionnaire (Sample 42)
5. Materials Evaluation Questionnaire (Sample 43)

Again, along with these instruments you should use your day-to-day interactions with clients and others to help gauge the effectiveness of the community-awareness effort.

What to Do with Results

The results should indicate strengths and weaknesses in your approaches or materials which should be modified.

An assessment of gaps in the child-services structure of the community should be conducted around the time first-year evaluation activities are being completed. A knowledge of what is not working

in your program (from evaluation results) coupled with information on what is needed in the community (from assessments), will provide the guidance you need in redesigning parts of your program. If your agency works with a preschool population, three groups should be asked to participate in the assessment:

1. Nursery schools. Send a letter (Sample 44) to these schools identifying the types of services available from your agency. Arrange for a visit to discuss their needs. (This letter should only be used after an agency has become established in a community.) You may also use a form (such as Sample 45) to conduct a needs assessment in a particular school or agency that requests your help.
2. Parents. Often parents would welcome more information about resources that are available in the community for themselves and their child. Sample 46 is an assessment device to determine what each parent specifically needs.
3. Other agencies. Sometimes a needs assessment such as Sample 45 can be sent to other agencies. However, agencies may be threatened by a request for this kind of information. It is often better to take the opportunity at a meeting of agencies to share items your agency has that others may need - such as: research data, grant-writing expertise, or the location of financial resources. This offer may open dialogue regarding the other agencies' problems and needs.

There are frequent occasions within the course of an agency's activities that are opportunities to identify needs within each of these

groups that your agency can fill. For example, when providing consultative services (e.g., your personnel working with a child from another agency), you may spot other services that you can provide. During screenings conducted by your agency at a nursery school or other location, you may note gaps in services that need filling. In your own workshops, you can allocate time for identifying new services that you could provide. Sample 47 is a format for such an activity with nursery schools, Head Start, and day care centers as audiences.

This guide has provided the reader with an overview of the processes, materials and evaluation instruments for the creation of community awareness and interagency cooperation within the community. Samples have been provided to be used as a guideline. Agencies will need to individualize the samples to meet their specific needs.

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2

THE SAMPLES

PART II: THE SAMPLES

THE FOLLOWING ARE EXAMPLES OF INFORMATION AND MATERIALS THAT MAY BE USED
IN A COMMUNITY-AWARENESS PROGRAM

PROFILE OF A COMMUNITY AWARENESS WORKER

An individual who has the ability to -

1. relate to all kinds of people
2. convey sincere interest and a good "listening ear"
3. empathize, but also maintain professional objectivity
4. refrain from personal judgement
5. relate to others because of a common base of experience (i.e. being a mother, wife, or parent of a handicapped child)
6. act independently and make on-the-spot decisions
7. deal appropriately with confidential information
8. know how and when to refer parents to the appropriate specialists
9. convey confidence and self-respect and to encourage these qualities in other people

The Community Awareness worker should also have some experience in preschool education, school-age education, social work, or nursing. This individual should be able and willing to change and grow with experiences and be able to admit to and learn from mistakes.

TOPICS FOR ROLE-PLAY SITUATIONS

(Break into Small Groups)

At training sessions, encourage staff to role-play. One staff member role-plays a community worker, another portrays:

- Dubious parent
- Another human-service worker who feels threatened by your program
- A self-assured grandmother who believes that "Johnny may be a little slow, but he'll grow out of it"
- A practical parent who questions how you know you make the difference in a child's development. If you hadn't interfered, he still might have progressed
- A doctor who asks about your program
- A parent who blames all her troubles on her child
- A parent who has little practical knowledge about raising her child and has manufactured unfounded worries
- A hostile parent who questions your motives for everything

After role play:

Discussion in small group of the conflict and participants' feelings during the role-play session. Jot down resolution of the conflict. Return to large group to discuss possible resolutions. Compare effectiveness. Participants should relate to personal experiences when discussing resolutions of the conflict.

PROCEDURES FOR APPROACHING MOTHERS AT A WELL BABY CLINIC

In order to identify the children in the community who are in need of service, it is essential that the Community Awareness worker make first-hand visits to those places where the children might be seen. One example of this is visiting a well baby clinic. The following is an example of procedures that might be used:

1. Call for an appointment to meet the clinic director.
2. Explain the program.
3. Ask permission to mingle with mothers and their children who are waiting for their appointments on clinic day.
4. Clearly establish date and time, who will come, and what will be done.
5. Call to confirm the date the day before visiting.
6. Introduce self and explain your purpose to the receptionist.
7. Ask advice of receptionist, that is, where you distribute flyers.
8. Station person near the toy or book corner in order to facilitate interaction and discussion with mothers.
9. Introduce self to individual mothers.
10. Give brief descriptions of programs and flyers.
11. Personally thank all clinic staff involved.
12. Write a formal thank you to the clinic director.

ACQUAINTING PHYSICIANS WITH YOUR SERVICE

Local doctors, especially pediatricians, are currently involved with most of the children in the community. It is essential that these doctors be reached. The following methods have proved to be successful:

1. Mail program flyers and written program descriptions, especially the descriptions of the kinds of screening services and costs to all local doctors. A card might be included for the doctor's easy reference, since oftentimes the other material is thrown away.
2. Review health forms of children already in the program in order to identify doctors who serve the children and their addresses. Visit these doctors first since they are familiar with the children whom you serve. You may then be able to use their names as supporters of your program when you visit other doctors.
3. Plan systematic visits to doctor's offices. It is suggested that an appointment be made for 5 minutes of the doctor's time.
4. Introduce yourself to the nurse/receptionist and ask if there are a few minutes for you to speak with this person.
5. Inquire whether the doctor received the information about the program. If no or not sure, give another set.
6. Explain the program and the need for developing communication with doctors.

SAMPLE 4 (CONT.) ACQUAINTING PHYSICIANS WITH YOUR SERVICE

7. Request the receptionist/nurse to ask the doctor about displaying the poster or flyer in the office.
8. Chat awhile about the receptionist's job, the children who come to the doctor, and answer any questions she might have about children who should be referred to your agency.
9. Thank the receptionist/nurse. Suggest that a call be made to you personally if there are questions about any children whom the doctor sees or any cases which may need immediate attention.
10. Send a formal thank you note to the doctor and nurse for their cooperation.

The doctor's receptionist is usually the most effective channel to his interests.

BECOMING FAMILIAR WITH THE COMMUNITY

The following steps are suggested for becoming familiar with a particular town:

1. Drive the main streets early in the morning as the town begins to move.
2. Observe the traffic patterns, places people tend to gather, types of housing, shopping centers.
3. Walk along the central area to observe the locations of the post office, high school, banks, medical groups, churches, employment office, police station, library, Chamber of Commerce, community action program.
4. Distribute flyers and posters along the way. Two key places are fast food centers and children's clothing centers (always ask permission and bring your own tape).
5. Focus on child care centers - that is day care, Head Start, nursery schools, pre-kindergarten programs. Do not stay if you are interrupting the routine. Leave a flyer with the phone number and name. When someone is available to speak, inquire about their program first and be a good listener. Then share your materials and answer their questions.
6. Talk to people everywhere. Inquire about their special interests and how long each one has lived in the town.
7. Don't hesitate to research new or unknown areas. That is, the police station or the residence for different religious groups.

ACTIVITY

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June
I. The Staff										
A) Hire	X									
B) Train	X									
1. Tour of Facilities	X									
2. Exposure to Printed and Audiovisual Materials	X									
3. Attendance at Program Workshops	X									
4. Knowledge of Available Services	X									
5. Information about Staff	X				X					X
6. Role-Play Exercises	X									
7. Familiarity with the Community	X									
8. Training in Conveying Information to Diverse Audiences	X									
II. Investigate Community										
A) Identify Potential Audiences	X	X								
B) Compile List of Agencies		X	X							
III. Planning and Developing										
A) Develop Timeline	X									
B) Develop Procedures										
1. For Making Initial Contacts	X									
2. For Keeping Records		X								
3. For Referring Children and Parents		X								
4. For Conducting Workshops (include agendas)			X							
5. For Disseminating Materials	X									
C) Determine Staff Responsibilities		X								

Timeline for Community Awareness Activities

Sample 6

ACTIVITY

Sept Oct Nov Dec Jan Feb Mar Apr May June

D) Development and Distribution of Materials

1. Develop Posters and Flyers
2. Distribute Posters/Flyers
3. Develop Professional Brochures
4. Distribute Professional Brochures
5. Develop Business Cards
6. Develop Newspaper Articles and Advertisements
7. Develop Listing for Yellow Pages
8. Develop Visitor Orientation Packets
9. Develop Program Rationale
10. Develop Program Descriptions
11. Develop List of Client Characteristics
12. Develop Curriculum Description
13. Develop Case Studies
14. Develop Fact Sheet

IV. Evaluation (see next page)

Timeline for Community Awareness Activities

Sample 6 (cont.)

ACTIVITY

FIRST YEAR

SECOND YEAR

THIRD YEAR

- I. A) Hire Staff
(Staff Changes)
- B) Train Staff
- II. Planning and Developing
Community Awareness
- A) Identify need for your service
in community
- B) Develop materials to emphasize
that your service is needed
- C) Provide evidence of effective-
ness data from 1st year
(Development fact sheet)
- D) Offer workshop to other
agencies
- III. Evaluate effectiveness of
Community Awareness
- A) Procedures
- B) Materials
- C) Appropriateness of
Timetable

X

X

X

X

X

X

X

X

X

X

THREE YEAR TIMETABLE FOR COMMUNITY AWARENESS ACTIVITIES

Sample 6 (cont.)

INTRODUCTORY LETTER TO AGENCY

Dear Sir:

We are presently operating a Pre-School Program for Children with Special Needs, under Title VI-B of the Education of the Handicapped Act. In this program we offer both a Special Education Nursery School environment to children and Home Training to children and parents who exhibit delays in speech and language, motor skills, social adjustment or behavior problems or hearing and vision problems. In March, a new program will be available through the Bureau of Education of the Handicapped funding which will serve not only those mildly to moderately handicapped children but also severely and profoundly mentally retarded children in either a home based program or classroom program, depending on their needs.

The purpose of this letter is to inform you of available services through the Preschool Program and to indicate to you that I am sincerely interested in working cooperatively with you in identifying handicapped children and providing the most appropriate educational environment for them. It would be most helpful to me to be familiar with the services your agency offers so that I can refer parents, when appropriate. I would also appreciate your awareness of our program for possible referral of children when appropriate. I am enclosing a description of our programs for your information. I would appreciate any information which you could send me regarding your agency and its services.

I would like to have the opportunity to meet with you or a representative of your agency during the next month to discuss our programs and possible methods of working cooperatively. I will call your office in the next week or so in the hope of arranging a time when I can meet with you.

Sincerely,

TELEPHONE CONTACT FORMAT

1. Name of person called _____
2. Professional affiliation _____
3. Contact suggested by _____
4. Date called _____
5. Name of person making call _____

"Hello. My name is _____. I am calling at the request of _____, because he/she thought that you would like to hear about a new program we are developing for preschool children with special needs." The program will be run by _____ agency.

This program will provide Home Teaching for children from birth to school age who demonstrate learning-handicapping conditions. A Home Teacher will make weekly visits to train the parent to work with his/her own child. We are presently looking for children and we plan to be starting within the next month.

Do you see this service as being of any help to your agency?

Do you have any questions?

Would one of the following services be of interest to you?

- _____ A personal visit at your facility
- _____ Flyers. If so, how many? _____
- _____ Program descriptions. If so, how many? _____
- _____ Telephone references to call _____
- _____ Case for referral _____
- _____ Staff presentation.

Thank you for your time and interest.

FOLLOW-UP LETTER (EXPRESSING THANKS TO AGENCY DIRECTOR)

Dear Pat:

I would like to take this opportunity to thank you for the time that you spent with me when I visited your program. It is certainly a pleasure to visit a program which is meeting the needs of so many preschool and school age youngsters. I intend to inform my staff of the services which you provide so that we may make appropriate referrals and so that we can work cooperatively with your agency to meet individual student needs. I thank you again for your cooperation in meeting with me and I look forward to working with you in the future.

Sincerely,

DIRECTIONS FOR USE

1. In section I, write name, title, address and phone of recipient of dissemination activity.
2. Keep a different log for the following categories of people:
 - a) parents
 - b) LSA's
 - c) regular education early childhood
 - d) special education early childhood
 - e) community
 - f) conference
3. Place the name of the category of people on the line in the upper right portion of this form.
4. In section II write: the number of people involved in activity, and composition of audience.
5. In section III, place the date of the contact in the appropriate box.
6. In section IV, write the amount of material distributed in the appropriate column.
7. In section V, list any follow-up needed.

SECTION III

SECTION IV

CATEGORY OF PEOPLE _____

SECTION V

Follow-up

On-site Visitor Orientation

Visit to other program

Mailing

Phone call

Needs Assessment

Home Training Workshop

TD Workshop

P/S Workshop

Visit for Consultation

General Awareness Workshop

Other

Brochure

Visitor Orientation Packet

Business Card

P/S Manual

Project Manual

TD Manual

Parent Activity Information

Fact Sheets

Home Program Information

Screening & Diagnosis

Posters

Fliers

Articles

Other

SECTION I

SECTION II

Name

Title

Address

Phone

Name

Title

Address

Phone

Name

Title

Address

Phone

Name

Title

Address

Phone

AL/T/ep 1/11/90

LETTER TO PARENTS ABOUT SCREENING

Dear Parents:

We are pleased that you chose to have your child screened by the Preschool staff. We realize that much goes on during this short session. We would like to give you a description of what occurs during the screening.

The Screening consists of the following activities:

1. The speech therapist and psychologist use a comprehensive screening test. This indicates your child's strengths and weaknesses in the areas of movement, language and thinking skills.
2. You participate in an interview which includes discussing background information about your child and finding out how you see your child's needs (via the parent questionnaire).

Screening is not a complete evaluation of your child's skills and abilities. It is meant to screen out those children whose development is not following the typical pattern and for whom further evaluation or programming may be necessary.

The screening team presents the information at a preschool intake meeting and recommendations are made. This information is then communicated to you by a member of the team.

SAMPLE 11 (CONT.)
LETTER TO PARENTS ABOUT SCREENING

You may be told:

1. Your child does not need special services at this time.
2. Your child does not need special services at this time, but we would like to see him or her again in three to six months for rescreening.
3. Further evaluation is necessary to determine if the child needs special services. This diagnostic assessment might be done by our staff or you may be referred to another agency for the evaluation.
4. You may be referred to another agency for appropriate services.
5. Your child may be accepted for our Home Program or Classroom Program.

We hope that this description helps you understand the screening process.

If you have any questions, please feel free to contact us.

Sincerely,

ASSESSMENT OF PARENTAL NEEDS

It is important for us to know what you as parents feel would be important to learn while your child is in our program. The purpose of this form is to find out what activities would be most important to you so that we can develop our parent program for the year based on your needs.

Please complete the questionnaire by placing a check in one column for each item.

	<u>VERY IMPORTANT</u>	<u>SOMEWHAT IMPORTANT</u>	<u>NOT IMPORTANT</u>
<u>TYPES OF MEETINGS:</u>			
1. Group meetings in the day	_____	_____	_____
2. Group meetings at night	_____	_____	_____
3. Meetings just for fathers	_____	_____	_____
4. Meetings just for mothers	_____	_____	_____
5. Meetings for both parents	_____	_____	_____
6. Individual conferences with teacher and members of the team	_____	_____	_____
<u>POSSIBLE TOPICS FOR MEETINGS</u>			
1. Activities to do at home			
a. Gross motor skills: these are large muscle skills, such as sitting up, walking, jumping, etc.	_____	_____	_____
b. Fine motor skills: these are small muscle skills, such as grasping objects, working puzzles, feeding, etc.	_____	_____	_____
c. Social skills: these are skills such as sharing and playing with children and adults	_____	_____	_____
d. Self-help skills: these skills eventually make the child independent. Some examples are dressing, undressing, feeding and toileting.	_____	_____	_____
e. Preacademic skills: these skills prepare the child for school. Some examples are matching objects, sorting objects, counting objects, naming colors, etc.	_____	_____	_____
f. Language skills: these are communication skills which involve the ability to understand others and to make oneself understood.	_____	_____	_____
2. What we do in the classroom	_____	_____	_____
3. Services available in the community	_____	_____	_____

SAMPLE 12 (CONT.) ASSESSMENT OF PARENTAL NEEDS

	<u>VERY IMPORTANT</u>	<u>SOMEWHAT IMPORTANT</u>	<u>NOT IMPORTANT</u>
4. Description of tests we use	_____	_____	_____
5. Information on child development	_____	_____	_____
6. How to involve brothers and sisters in your child's education	_____	_____	_____
7. Exchange practical suggestions from other parents	_____	_____	_____
8. Laws and your children's rights	_____	_____	_____
9. Labels - meaning pros and cons	_____	_____	_____
10. Question and answer time with			
a. Pediatric neurologist	_____	_____	_____
b. Ophthalmologist	_____	_____	_____
c. Audiologist	_____	_____	_____
d. Speech therapist	_____	_____	_____
e. Physical therapist	_____	_____	_____
f. Psychologist	_____	_____	_____
g. Other	_____	_____	_____
11. Panel of parents of children who have graduated from Preschool	_____	_____	_____
12. Meeting with the Director of Special Education	_____	_____	_____
13. Suggestions for toys at home	_____	_____	_____
14. What to tell other people about your child and his program	_____	_____	_____
15. Videotapes of your child's day	_____	_____	_____
16. Behavior modification	_____	_____	_____
17. How to maintain your own identity and growth when you have a special child	_____	_____	_____
18. The emotional development of the preschooler	_____	_____	_____
Please list any other topics of interest to you.			

REFERRAL FORM

Referral To: _____

Name of child _____ Date of birth _____

Address _____

Length and history of participation in this Program _____

Strengths _____

Weaknesses _____

Description of Behavior _____

Tests Administered:

<u>Name</u>	<u>Score</u>	<u>Date</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Reason for Referral _____

LETTER REFERRING CHILD TO ANOTHER AGENCY

Ms. Mary Shute
Director, Speech and Hearing Center
Language Rehabilitation Services
Main Street
Sunnyville, New York 00000

Dear Ms. Shute:

The Putnam/Northern Westchester BOCES Preschool Screening Team has recommended a complete Speech/Language, Hearing, and ENT evaluation for:

Child's name _____

Address _____

Phone _____ dob _____

Reason for referral _____

Parent/guardian _____ has been advised of
this recommendation.

If we can be of any further assistance, please contact us.

Thank you.

Sincerely,

ON-SITE SCREENING FORMChild Observation in a Preschool Setting

Child _____ Date _____

Facility _____ Contact _____

Observer _____ Observation Time _____

1. Awareness of routine and expectations.
2. Ability and/or willingness to follow directions.
3. Ability to relate to peers.
4. Means of expressing needs and wants.
5. Independent projects completed.
6. Use and care of materials.
7. General control of body movements.
8. Relationship with teacher and adults.
9. Ability to care for personal needs.
10. Level of interest and curiosity demonstrated.
11. Use of language to communicate.
12. Behavior during times of transition.

SAMPLE 15 (CONT.) ON-SITE SCREENING FORM

13. Amount of structure needed from teacher.

14. Role played in group activities.

15. Cognitive skills demonstrated.

16. Motor skills demonstrated.

17. Summary statements.

AGENDA FOR INTERAGENCY MEETING TO REVIEW SCREENING RESULTS

I. Introduction

- A) Introduce self and role in your agency.
- B) Describe total program - referring to handouts.

II. Referral Process

- A) Review screening packet.
- B) Review parent questionnaire and releases required.

III. Explain the screening testing procedure

- A) Specific information on information gained and method of administration.
- B) Review results of child from their setting who was screened.

IV. List and explain follow-up steps resulting from screening

- A) Transdisciplinary assessment.
- B) Necessary paperwork to be completed.
- C) Criteria for child entering the appropriate program.

V. Questions

Handouts

- 1. Screening packet
- 2. Parent questionnaire
- 3. Screening summary form
- 4. Criteria for diagnosis
- 5. Forms to be completed for entrance
- 6. Program description

WORKSHOP AGENDA FOR PARENTS

- I. Introduce Staff and Boces Program
- II. Referral System - from time parent calls for an appointment.
- III. Description of the screening experience.
- IV. Meeting a child's needs.
 - A. How a decision is made to recommend placement.
 - B. What placement means.
 - C. Use of Individualized Educational Plan.
 - D. Review "Your Child's Rights" - booklet from N.Y. State Education Dept.
 - E. HC 23 - to petition the Family Court to fund the program.
 - F. Describe Committee on the Handicapped and annual review of progress.
- V. Parent's Role
 - A. You are the primary teacher of your child.
 - B. Feelings of parents of children with special needs.
 - C. Cooperation with the program.
- VI. Reactions and Questions
- VII. View materials, tests, Portage Curriculum Kit.

WORKSHOP AGENDA FOR CHILD-SERVICE AGENCIES

1. Introduce staff and BOCES program.
2. Review the referral system.
3. Describe screening process and diagnostic testing.
4. Explain Individualized Educational Plan - discuss setting appropriate goals and task analysis.
5. Curriculum and use of checklist.
6. Parents as a major resource for their child.
 - a) Volunteer System
 - b) Adapting classroom methods for the home
7. Home Teaching Program - A typical visit.
8. Reactions and questions.
9. Materials display and demonstration of teaching techniques.
10. Handouts - flyer, program description, Screening Test, parent questionnaire, screening summary.
11. Materials to share - kits and checklists, parent packet, screening packet, selection of forms.

TOPICAL WORKSHOP FOR UNWED MOTHERSPARENT WORKSHOP - IMPROVISING MATERIALS FOR TEACHING PRESCHOOLERS**I. Philosophy**

- a) Methods and not materials are stressed.
- b) Value of time spent and not price of toy is stressed.
- c) Use of containers to make any activity special.
- d) Respect for toy and self-control developed by stressing child's involvement in opening and closing an activity.

II. Demonstration of Successful Materials.

- a) Nesting tin cans.
- b) Play dough. Recipe to be shared.
- c) Flashlight.
- d) Clothes pins.
- e) Food labels for matching.
- f) Peg boards made from dowels and cardboard boxes.
- g) Balls - knitted, crocheted and puff of yarn.
- h) Disc in slot toy - tin can and juice tops.
- i) "B" bag of objects starting with "b".
- j) Large rattle made from 2 large soda bottles with removeable objects, i.e. pennies, marbles.

III. Reactions and Questions**IV. Books on Display**

TOPICAL WORKSHOP FOR LOCAL COLLEGESMATERIALS DISPLAY AND DEMONSTRATIONI. Matching Activities: (many include fine motor and cognitive skills)

- peg boards
 - 3 pegs with rings of matching colors
 - 5 pegs made from dowels and cardboard box
 - 10 pegs made from dowels and cardboard box
- sorting boxes made from can and plastic lid
 - 1 slot and 5 discs from juice cans
 - 2 slots and 5 each of discs and nuts
 - 10 pennies for 1 small slot
- box of objects (2 each of block, raisin box, straw, bottle top)
- laminated paper shapes to pattern on folder
- numbered discs to numbered circles on paper
- can of buttons (about 20 sets)
- cookies (place loose ones onto set glued on folder)
- Christmas gift wrap match (same procedure as above)
- corrugated paper shapes
- 5 sets of coins in a match box
- big and little objects (about 20 sets of household items)
- dowels (to match by height, width and color)
- fire hydrant candy containers (3 of each color, 2 with beans, 1 empty)

II. Motor tasks

- plastic clothes pins
- balls (knitted, crocheted, and puff of yarn)
- bean bag and clorox bottle target
- foot print patterns
- old coin purse with snap, zipper, clasp, pages to turn

SAMPLE 20 (CONT.)
TOPICAL WORKSHOP FOR LOCAL COLLEGES

- play dough with straws (recipe to be shared)
- nesting cans (use 2, 3 or 5 to nest or stack)

III. Language Stimulation

- Flash cards (made from magazine pages for naming and memory)
- action pictures
- flash light
- "Feelie Box"
- Food labels to group and identify by category
- Secret word activity

TOPICAL WORKSHOP FOR PARENT GROUPSWORKSHOP FOR MOTHERS WITH THEIR CHILDREN AT A WOMEN'S CENTER MEETING

(Young mothers who are new in the area. Children moving about).

- I. Information About Preschool Program in Special Education.
- II. Facts about agency program.
- III. How to Know What to Worry About.
- IV. Individual Problems we all share.
 - a) To establish and use a routine.
 - b) Enforcing limits and why.
 - c) Managing behavior and using reinforcements.
 - d) Providing appropriate choices and training in decision-making.
- V. Follow-Up Ideas Generated
 - a) Seek funds to service the general population.
 - b) Establish a phone-in time for mothers.
 - c) Child Development, Developmental Checklist, What to Expect and When.
- VI. Materials to be displayed
 - a) Parent Activity Kit
 - b) Individual Educational Plan
 - c) Screening Kit
 - d) Screening Packet
 - e) Star Chart
 - f) Happy Face Achievement Award
- VII. Handouts
 - a) Program description
 - b) Parent questionnaire
 - c) Language intervention ideas
 - d) High Risk Characteristics
 - e) Articles on Behavior
 - f) Activities book

TOPICAL WORKSHOP FOR PROFESSIONALSTHE TRANSDISCIPLINARY TRAINING, ASSESSMENT AND CONSULTING MODEL FOR EARLY CHILDHOOD INTERVENTION

Putnam/Northern Westchester BOCES' Department of Special Education is currently operating a Regional Demonstration Program for Preschool Handicapped Children which is funded by the United States Office of Education, Bureau of Education for the Handicapped, Handicapped Children's Early Education Program. One important component of the classroom program for three and four year old handicapped children is the Transdisciplinary Team Approach. This approach allows a part-time group of clinical staff members to provide maximum input to the classroom teacher regarding diagnosis of child abilities and appropriate goals. This method of staff training, child assessment and consultation service to teachers utilizes minimal staff time and effectively aids in improving handicapped preschoolers' skills.

When providing services for young children, clinical team members such as psychologist, social worker, speech and language therapist and physical therapist are often hired on a part-time basis (one to two days per week). Direct therapeutic services are therefore not feasible with each member's limited schedule. The method to be described arose from a need to ensure quality services for youngsters by making maximum use of clinical team members' time. For this reason, the Transdisciplinary Training, Assessing and Consulting Model was developed.

The model makes use of Transdisciplinary Team Members' time in three areas -

1. STAFF TRAINING - At the beginning of each school year, each member of the team, including the classroom teacher, presents a workshop which trains other team members. Each team member demonstrates what she assesses in a child and its implications for the child's classroom and home program. This provides for "role extension," allowing others to understand relevant aspects of the other disciplines. At early stages of development, many assessments are redundant among team members and test the same item (for example, both the language therapist and school psychologist may test knowledge of colors and shapes). The staff training allows team members to be aware of redundancies and decreases the number of times these items are assessed with the child.
2. CHILD ASSESSMENT - An "arena evaluation" then takes place for each child. This evaluation is short and includes all members of the transdisciplinary team, including classroom teacher and parents. The Transdisciplinary Assessment Model developed by the Regional Demonstration Project Staff is utilized. This assessment utilizes parts of standardized tests as well as informal activities. This assessment reduces redundancy in testing and allows each team member to gain the specific information which is needed to develop goals. A transdisciplinary team conference is then held, which integrates all information into a systematic record and projects long-term goals for the child's IEP. Several children are assessed each day through this approach. The advantage is that all team members have seen the child perform all activities and each has some knowledge of what other members are assessing. Parents and classroom teacher provide additional input as to the child's functioning based on the Portage Guide to Early Education and personal knowledge about

SAMPLE 22 (CONT.) TOPICAL WORKSHOP FOR PROFESSIONALS

the child. This process allows team members to identify possible inter-relationships among weaknesses and skills and develop a truly individualized plan. Time is used effectively.

3. TEACHER CONSULTATION MODEL - After all the children have been assessed through the use of the Transdisciplinary Assessment Model, team members begin a consultant approach in working with teachers and parents. IEP's are closely monitored, improvement noted and suggestions given. Case conferences for each student occur at least four times a year. The teacher is always aware of the specific needs of the child as they relate to his total being. Each clinical team member practices "role release" and trains and monitors the teacher, parents, aides or parent volunteers in specific activities which should be carried out for each child on a regular basis.

This presentation will describe the model, focusing on the assessment, how it differs from an interdisciplinary approach and the advantages and disadvantages from the clinical team members' and teachers' points of view. This model can be used with any age group or population, and modifications will be discussed with session participants regarding their individual settings.

DIRECTIONS FOR DISTRIBUTING FLYERS AND POSTERS

1. Dress with a professional appearance in mind.
2. Organize materials carefully.
3. Carry a letter of introduction written by your top administrator.
4. Request to see the manager of the facility.
5. Introduce yourself and explain the program briefly.
6. Show the poster or flyers and ask permission to display them.
Also, ask where to display them.
7. Bring your own tape and tacks.
8. Thank any personnel involved in helping you.
9. Choose places of high traffic for families.

Dear Parents:

I appreciate your offering to take the time to help us distribute our posters and flyers to the community, especially during this very rushed season. Along with this letter, you are receiving a number of posters and flyers so that you can distribute them in the community which is listed at the top of the letter. I would very much appreciate it if you could try to have this completed as much as possible by Monday, December 17. My purpose in this is that many people may have the opportunity to read the posters and flyers during the Christmas shopping season. The following is a list of some suggestions which you might want to read before distributing these in the community.

1. Consider going to places such as supermarkets, stores, whether clothing stores or liquor stores, etc., churches, doctors' offices, libraries, and other places where the public visits.
2. When going into a store, you might attempt to leave a poster hanging on their bulletin board or near their front doorway. The flyers are probably best placed in doctors' offices, libraries and other places where people might easily pick them up while waiting for service.
3. When attempting to leave off any posters or flyers, I suggest you approach the manager first, if at all possible. Explain to her/him that you are a representative and that the program is attempting to advertise the free service which they have for children and parents in this community. Ask if you can possibly be allowed to hang a poster on the wall or on their bulletin board or leave some flyers. When you have received permission, I suggest that you carry your own scotch tape and thumb tacks with you and hang up a poster immediately, if that is at all possible. I suggest this because sometimes when you just leave the poster for other people to hang up, somehow they get misplaced or do not get hung up immediately. So it helps to just do it yourself and it also saves their employees some time.
4. If the manager or the people in the store have any questions, suggest to them that they call the number on the poster or flyer, and the person answering will be happy to attempt to answer them, or the supervisor of the program will get back to them as soon as possible.

I really appreciate the time that you are spending in doing this and the support that you are providing for our program. Thank you so much for your help. Have a very pleasant holiday.

TO REFER A PRE-SCHOOL CHILD

Any parent or professional may request that a child be screened for possible special needs.

A screening consists of a parent interview and an opportunity to take a closer look at the individual needs of the child.

For further information, or to arrange for a screening, call:

Mrs. Mary Forester

at

962-2377

or write:

Pre-School Programs for Children with Special Needs
Board of Cooperative Educational Services of
Putnam/Northern Westchester

French Hill School
Yorktown Heights, New York 10598

-4-

WANTED!

Pre-School Children Ages Birth to Five



Who have Special Needs

IN: Language

Speech

Movement

Hearing and Vision

Social Adjustment

FREE - Consultation Service, Diagnosis, Home Training
or Nursery School Services Are Available

For More
Information
Contact:

Pre-School Programs for
Children with Special Needs

(914) 962-2377



PRE-SCHOOL PROGRAM

Early childhood programs for children from birth to five, with special needs, are being provided by BOCES using funds made available through State, County, and Federal monies. A variety of programs (see page 3) are offered at no cost to families.

What is a "special need"?

A child might have a special need or developmental lag in any one or more of the following areas of development:

- language
- speech
- motor
- visual ability
- hearing ability
- social adjustment

SERVICES AVAILABLE THROUGH THESE GRANTS

Screening and Consultation Services

After meeting with the child, early childhood specialists discuss their findings and suggestions with the parent.

More intensive diagnostic services are available for some children with special needs. Findings and program suggestions are discussed with parents.

Home Teaching Program

Individualized developmental programs are planned for each child by professionals and parents.

Weekly visits are made in the home by professionals to assist parents in working with their children.

Classroom Program

Individualized developmental teaching is conducted in a classroom setting for the purposes of developing language, learning and social abilities.

In some cases, special teachers of language and speech, a psychologist, a social worker and/or a physical therapist, may assist the classroom teacher.

Classes meet five half-days a week at centers in Peekskill, Yorktown and Mahopac.

Family involvement and follow-up is emphasized.

Community Outreach

Inservice training and support is available to nursery schools serving special needs children.

Parent groups are a regular part of the program.

WANTED!

Pre-School Children
Ages Birth to Five



Who have Special Needs

IN: Language
Speech
Movement

Hearing and Vision

Social Adjustment

FREE- Consultation Service, Diagnosis, Home Training
or Nursery School Services Are Available

For More
Information
Contact:

Pre-School Programs for
children with Special Needs

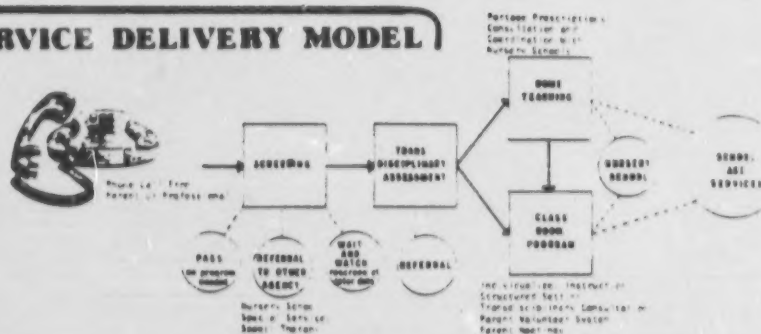
(914)- 962-2377

Return Address

Place
Stamp
Here

Ms. Amy L. Toole, Supervisor
Preschool Program
Putnam/Wo. Westchester B.O.C.C.E.S.
Yorktown Heights, New York 10598

SERVICE DELIVERY MODEL



BOARD OF COOPERATIVE
EDUCATIONAL SERVICES
Putnam/Westchester Education Center
Yorktown Heights, New York 10598 • (914) 345-2700



Provision for direct referral to children and families is provided jointly by the New York State Education Department and the county of residence of the child.

Funding for consultation and training is provided through grant no. 3007000198 from Bureau of Education for the Handicapped, Handicapped Children's Early Education Program, U.S. Office of Education.



PRESCHOOL PROGRAM



A REGIONAL DEMONSTRATION PROGRAM FOR PRESCHOOL HANDICAPPED CHILDREN

Who We Are

The Regional Demonstration Program for Preschool Handicapped Children at Putnam/Ho., Westchester B.O.C.E.B., currently provides educational services for 125 children from birth to age five. Children with special needs benefit most if they receive specialized services during their preschool years. Teaching the family to work with the child aids in the child's overall development and his acceptance into the family and community.

What We Do

- screen children
- assess children
- provide educational services
- provide consultation and training to schools and agencies

The Screening Process

parent or professional may request that a child be screened for possible special needs. Screening consists of a parent interview and observation of the child's skills and behavior. Children who are delayed in any area of development are eligible for the preschool program. Referrals are made to other agencies when indicated.

Services Provided to Children And Families

Transdisciplinary Assessment And Teacher Consultation Model

This model was designed to provide an efficient assessment of the child and family. During one session, team members work cooperatively to assess the child's needs and abilities and to develop a prescriptive plan for the child and family. The team will consult with the child's teacher to assist in the implementation of this plan.

Home Teaching

Using the Portage Project model, individualized developmental programs are planned for each child and weekly visits are made to assist parents in working with their child.

Classroom Teaching

The classroom programs are highly structured with activities selected to meet the individualized educational plans prepared for each child. Parents are expected to participate in classroom observations, parent-teacher conferences and parent group meetings.

Parent Volunteer System

This system was developed to maximize individualization in the classroom and to provide training for parents. Parent volunteers are assigned to specific activities within the daily classroom routine.

Services Provided to Parents Preschool Programs

Awareness:

Informational materials on all aspects of the program are available.

On Site Visitation

The preschool program classrooms are available for observation by appointment.

Consultation And Training

Preschool staff are available to provide:

- needs assessment to determine specific areas of consultation and training
- training in various model components, including:
 - home teaching
 - transdisciplinary model
 - parent volunteer system
 - interagency consultation
- administrative consultation on issues such as funding and staff development



For more information about the Regional Demonstration Program for Preschool Handicapped Children, please contact and return this self-addressed card to:

Supervisor
914-245-2000 ext. 434

☐ I am interested in receiving information on the preschool program

☐ I am interested in visiting the preschool program

☐ I am interested in receiving training and consultation services

NAME _____ POSITION _____
AGENCY _____ PHONE _____ (area code) _____
ADDRESS _____

(fill out)



AMY TOOLE
Supervisor

PRESCHOOL PROGRAM

FREE EARLY CHILDHOOD
PROGRAMS FOR CHILDREN
WITH SPECIAL NEEDS

Speech, Language, Hearing,
Motor, Vision, Social Adjustment

Board of Cooperative Educational Services
Yorktown Heights New York 10598 (914) 245-2700 EXT. 394

AWARENESS WORKSHOP ARTICLE IN LOCAL NEWSPAPER

Sunnyville Times

PARENT'S PLACE

A LOCAL PRESCHOOL SPECIAL EDUCATION worker will lead a workshop on "Children with Special Needs," at the Parent's Place in the Elementary School on Thursday, November 29 at 7:30 p.m.

The workshop will focus on how the family can understand and relate to a child with special needs. She will also discuss how parents can identify developmental lags in language, speech, motor and visual abilities and social adjustment.

For more information call:

444-9000

CHILD-FIND LISTING IN YELLOW PAGES

For children
ages:
Birth to 5



PRESCHOOL PROGRAM

**FREE - Consultation Service, Diagnosis, Home Training
or Nursery School Services Are Available**

**PRESCHOOL PROGRAMS FOR
CHILDREN WITH SPECIAL NEEDS**

For More Information Contact: 962-2377

Call:
Monday
through
Friday
8:30-4:30

BOCES Preschool Program
Yorktown Heights, N.Y. 10598

RATIONALE FOR PRESCHOOL PROGRAM

BOARD OF COOPERATIVE EDUCATIONAL SERVICES
Putnam/Northern Westchester Education Center
Yorktown Heights, New York 10598

The Putnam/Northern Westchester BOCES Preschool Program began in 1976 to provide early intervention/educational services for young (0-5 years) handicapped children and their families. It is our belief that children with special needs can and do benefit most if they receive specialized services during their preschool years. Teaching the family to work with the child aids in the child's overall development and his acceptance into the family and community.

A Transdisciplinary Team, consisting of a Social Worker, Speech Therapist, Physical Therapist, Psychologist and Special Education Teacher, meets with the family to assess the child's current level of functioning in the areas of language, cognition, motor, self-help and socialization. The team and family examine the relationship of the child's skills, the role of family members in working with the child and any contributing emotional factors which may have been caused by or related to the handicap, in order to arrive at an Individualized Educational Plan (IEP) for each child. This plan is based on all factors which might be related to the child's growth and development. The members of the Transdisciplinary Team continue to serve as consultants to the teacher and family in helping to implement the individualized program. Clearly stated goals and expectations allow the child, parent and teacher to experience success when goals are achieved.

Following assessment, the Transdisciplinary Team may recommend placement in our home teaching or classroom programs.

For children birth to three years of age, the home teaching program, a replication of the Portage Project, provides weekly assistance to the parents and child. Activities that develop needed skills are modeled by the home trainers, parents practice working with their child and a "prescription" is left for the parent to do daily with her child. This structured approach has been most effective in helping parents interact more appropriately with their handicapped children.

Children ages 3 to 5 may be enrolled in the home teaching program based on their individual and family needs. The home trainer coordinates services for those children mainstreamed into regular nursery schools.

Children ages 3 to 5 may be enrolled in one of our classroom programs. A highly structured classroom setting provides the child with materials and experiences that enhance his development and match his IEP. It is this individualized approach and not the material per se, which creates the improvement in skills. Group activities, including snack, provide the advantages of a regular nursery school program, along with opportunities to encourage language development and social interaction. Parent groups are held on a regular basis for discussion of specific topics and IEP review meetings are held regularly. Parents are integrally involved in their child's program in order to gain knowledge about their child and the skills necessary to work with their child at home. An observation system and a parent volunteer system is emphasized as well as parent prescriptions for working with their child at home.

This total holistic approach to working with the child and his family allows the child to then participate in the school program most appropriate for his needs in the least restrictive environment upon reaching school age.

PROGRAM DESCRIPTION #1

BOARD OF COOPERATIVE EDUCATIONAL SERVICES
Putnam/Northern Westchester Education Center
Yorktown Heights, New York 10598

PRESCHOOL PROGRAM FOR CHILDREN WITH SPECIAL NEEDS

The Board of Cooperative Educational Services of Putnam/Northern Westchester Counties operates an Early Childhood Program for Children with Special Needs. The Program is administered by the Special Education Department serving the component school districts in the Putnam/Northern Westchester area. Parents petition Family Court of the county in which they live to receive approval for the education of their child. Cost of tuition and transportation, if approved, is provided jointly by the State Education Department and the county. Funds are also provided from the Bureau of Education for the Handicapped in Washington D. C. The latter funds have been made available in order to develop a demonstration site where programming methods and curriculum are developed and disseminated.

The children who are served show delayed development in one or more of several areas. These include language, speech, movement, thinking skills, hearing, vision and social adjustment problems. Youngsters are also served who exhibit more severe handicapping conditions. The program has several components: Search, Screening, Service, and Parent Involvement.

SEARCH: Preschool children are not typically referred by districts as are school age children. Direct referrals are made by social agencies, medical institutions, public health nurses, physicians, nursery school teachers, parents and relatives, as well as school district personnel.

SCREENING AND DIAGNOSIS Parents who have any questions at all about their child's development, or would just like reassurance that their child is developing normally, may have their child screened by calling the Preschool Program secretary and setting up an appointment. Arrangements for screening may also be made through any agency. When the parent and child come for the screening, a parent interview and basic testing to indicate the strengths and weaknesses the child are administered by the Preschool Program staff. The results of this screening are presented to the Preschool Program screening committee and a decision is made at that time as to what would be the most appropriate help for the parent and child. This information is then communicated to the parent by one of the staff. A parent may be told that his child passed the screening, that further diagnostic information is needed, that another agency might serve the child's needs, or that this BOCES Preschool Program seems appropriate. If the child is appropriate for the program, the program and the process for applying for it are explained to the parents and further assessment is scheduled.

SERVICE There are two components in the program - the classroom program and the home teaching program. The classroom program is open to three and four year old children. Classes are held in Peekskill, Mahopac and Yorktown. There are approximately ten children in each class, which meets either in the morning or afternoon for 4½ days each week. Wednesdays are used for parent contact and case conferences.

SAMPLE 32 (CONT.) PROGRAM DESCRIPTION #1

In the classroom a program is designed to capitalize on each child's strengths and improve his weaknesses. An individualized educational program (IEP) is prepared from the information about the child. The program includes group activities and individual help in the areas of self-help skills, language learning, fine and gross motor development, socialization and cognition.

The home teaching program serves children from birth to five years of age. It provides home trainers, each of whom visits 10 to 15 children in their homes weekly. A child may be placed in this program for various reasons. One very important advantage of the home teaching program is that through work with the parents, who then teach the child, the parents learn more effective parenting and teaching skills. Another advantage of the home teaching program is that learning is occurring in the natural home environment. The home program allows time in the child's routine for attendance at regular nursery school, if appropriate. Sometimes the home trainer works with the nursery school teacher in establishing the most beneficial program for the child. The Home Teaching Program also provides weekly group parent training sessions. Once a week a parent training lecture, demonstration, or workshop is held concerning such topics as child development, child management, community resources, assessment, and the creation of appropriate child activities in the home. These sessions are approximately two hours in length and are held in a central location.

The entire staff meets weekly to discuss individual problems and to share information. Once a child leaves the Program to attend regular nursery school, kindergarten, or special classes, a staff member follows his progress by making school and parent contacts for at least one year in an effort to insure adjustment and success for the child.

PARENT
PROGRAM

Parents are involved in a variety of ways in the program. These include:

1. Attendance and input at IEP planning sessions.
2. Parent monthly group meetings for the classroom program.
3. Parent weekly group meetings in the home teaching program.
4. Parent participation in writing and teaching their child through use of parent prescriptions developed with staff.
5. Parents are requested to observe their child in the classroom and provide input to the teacher.
6. Parents are requested to volunteer their services in the classroom and to have a better understanding of the classroom routine and an understanding of their child's skills within the classroom program.

For additional information about the BOCES PRESCHOOL PROGRAM, please contact;

Ms. Amy L. Toole, Supervisor
Preschool Program for Children with Special Needs
Board of Cooperative Educational Services
Putnam/Northern Westchester Education Center
Yorktown Heights, New York 10598 - (914) 245-2700, Ext. 394

PROGRAM DESCRIPTION #2BOCES PRESCHOOL HOME TEACHING PROGRAM

The BOCES Preschool Home Teaching Program involves weekly visits made by four Home Trainers to about 40 children, ages birth to school age. Emphasis is placed on having parents participate in providing highly structured and individualized tasks for their own children. The obvious advantage is that learning occurs in the child's natural environment. The most important advantage is that parents become more effective as parents by developing appropriate expectations and consistent methods of behavior management. Whenever possible, this program is coordinated with other agencies, who are involved with the individual child in an effort to meet his specific learning needs by coordinating all the experience he/she receives. Funding is provided through the Family Court Act.

Placement in Home Teaching is recommended for the following three reasons:

1. The child is chronologically or developmentally too immature for a group classroom experience.
2. The presenting difficulty is the child's interaction with the family and the child's behavior in the home.
3. The child is able to function in a regular nursery school or child care center if he is supported by a Home Trainer at home and in his class. This reason for participation in the Home Program allows the child to remain in the least restrictive environment while receiving an appropriate individualized educational program.

The weekly visits are patterned after a model of home-based intervention developed by the Portage Project for Early Childhood Education for the Handicapped in Portage, Wisconsin. This project has received national validation as to its positive impact on children and their families by the United States Office of Education.

A typical 2-hour home visit includes the following steps:

1. The parent and child demonstrate their weekly activity for the Home Trainer.
2. The parent reviews and interprets the charting he/she has done on the activity sheet during the last week.
3. The Home Trainer presents and models a new weekly activity.
4. The parent and child demonstrate the new activity.
5. The Home Trainer reviews the new activity sheet for recording.
6. The Home Trainer conducts various planned activities to promote all developmental skills and parent-child interaction.
7. Private follow-up conversation or phone call allows direct parent feed-back without child's awareness (only when appropriate).

SAMPLE 33 (CONT.) PROGRAM DESCRIPTION #2

The Home Teaching Program works closely with related agencies to provide them with information regarding child development and maintain a larger dimension of general awareness of early childhood development and methods of identification of special learning needs. The Home Teaching Program has conducted the following activities for related agencies:

1. On-site screenings as a training experience for them.
2. Workshops for agency staff or parents.
3. Consultation services concerning possible referrals.

These activities are conducted with local Day Care Centers, Head Start Centers, Women's Centers, Department of Social Services, Child Protective Service and various nursery schools. They have served to identify children at early ages in need of special services and provide a vast public relations foundation for BOCES Preschool classroom programs. They also help to facilitate future placement. A close working relationship has been developed with area agencies as a result of these activities.

For additional information about the BOCES Preschool Home Program contact:

Ms. Amy Toole, Supervisor or
Jackie Jones, Home Teacher
Preschool Program for Children with Special Needs
BOCES Putnam/Northern Westchester
Yorktown Heights, New York 10598
(914) 962-2377

LIST OF CLIENT CHARACTERISTICS

Characteristics of High Risk Children

I. Prenatal History

- physical trauma during pregnancy, i.e. accidents, illness, medication
- emotional trauma or problems during pregnancy

II. Birth

- long labor
- forceps - lack of oxygen
- incubation
- any unusual occurrences

III. Home Setting

- Mother
 1. age: teenage or older
 2. emotional or intellectual handicaps
- Father - role in home
- Siblings - pattern of learning handicaps
- History of child abuse or neglect

IV. Child's Development

- lag in developmental milestones
- crying patterns
- inappropriate reactions to environment
- physical-emotional trauma

CURRICULUM DESCRIPTION

THE INTERRELATION OF TEACHER EXPERIENTIAL ASSUMPTIONS AND CURRICULUM PRACTICES OF THE BOCES PRESCHOOL PROGRAM

In developing the curriculum of the BOCES Preschool Program, twelve basic assumptions have been made about the educational needs of young children with special needs. The assumptions are based on Gesell and Piagetian theories, the empirical research data of Bloom and Lahey and the personal experience of the staff.

A description of the interrelation of the teacher experiential assumptions and the curriculum practices of the program follows. The assumptions effect the formulation of the child's goals and objectives and the implementation of the curriculum.

Teacher Experiential Assumption

Curriculum Practices

1. Young children with special needs benefit from a program of early intervention.

First premise of the program

- A) Affects the age range of the children in the program (birth to 5).

- B) Affects the purpose of the program - to meet the child's needs before entering school.

2. Children develop most favorably in a positive atmosphere.

A) Instructional Format

1. Children are encouraged to learn through exploration.

2. Allows for discovery learning and acceptance of mistakes.

B) Sequencing of activities and materials.

1. Children are provided with sequenced activities that are at their level of development.

2. The materials are sequenced to provide a learning environment in which the children can feel successful.

3. Language development is critical to the total development of young children with special needs.

A) Formulation of child's goals and objectives.

1. Language is involved in the assessment of the child's skills.

2. Language is involved in all goals written for the child (including cognitive, social-emotional and motor goals).

SAMPLE 35 (CONT.) CURRICULUM DESCRIPTION

B) Instructional format

1. The staff continually reinforces or expands verbal interactions.
2. Language is elicited in other activities as well (cognitive, social-emotional and motor).

4. A transdisciplinary team is the most effective means in educating children with special needs.

Child Assessment

1. Team involves a speech therapist, social worker, psychologist and teacher.
2. Team evaluates the child and plans the (IEP) Individualized Educational Plan.
3. Standardized tests and informal observation of play are used.

5. Structured approach fosters effective intervention between young children with special needs and their parents, teachers and other children.

Instructional Format

1. Daily routine with structured learning activities is followed.
2. Children learn routine and eventually move from activity to activity independently.
3. Limits are set within each period.
4. Children are encouraged to follow rules of the learning environment.

6. The individualized approach is an essential factor in fostering the child's development.

A) Individualized Educational Plan

1. Child is evaluated.
2. IEP is used to formulate child's goals and objectives.

B) Instructional Format

1. Teachers individualize instruction in small and large groups.
2. Activities are child-directed according to individualized plan.

C) Materials used

1. Sequenced - presented to child at their individual level.
2. Materials foster independence since they are self-correctional.
3. Alternative uses for materials exist - materials are flexible to provide interaction within a variety of ways.

SAMPLE 35 (CONT.) CURRICULUM DESCRIPTION

7. Play is viewed as an important instructional method in teaching socialization and other developmental skills.

- A) Instructional format
1. Contributing factor to exploratory learning.
 2. Means of teaching socialization skills in structured and unstructured play areas.
 3. Creative expression activities are designed to teach skills in each developmental area.
- B) Daily routine involves
1. Free play time and
 2. Play to teach skills.
- C) Observation of play is used to evaluate the child's level of development.

8. A successful preschool program is dependent upon the trust and cooperation of the parents.

- A) Parents are invited to observe in the classroom.
- B) Parents are involved in the transdisciplinary assessment of their child.
- C) Parents are involved in the development of their child's IEP.
- D) Parents are encouraged to volunteer in classrooms.
- E) Home program parents become responsible for the teaching sessions.
- F) Monthly parent meetings
1. Parents support other parents.
 2. Information is shared.

9. An attitude of acceptance of differences and dealing with the child on his level of development must be assumed by parents and teachers.

Formulating the IEP
The teacher and team construct a program for the student based on his or her specific style of learning and readiness for each task.

SAMPLE 35 (CONT.). CURRICULUM DESCRIPTION

10. Children learn more effectively through a combination of one to one teaching, small group and large group instruction.
- A) Grouping of children
1. One to one instruction is used to teach a new skill and to individualize the work on a specific task.
 2. Small group instruction
 - a) Skills are reinforced.
 - b) Children with similar needs are grouped.
 - c) Groups change daily according to child's needs and progress.
 3. Large group instruction is used to observe and evaluate skills that have been learned.
- B) Daily Routine: three types of grouping are accounted for.
- *****
11. Heterogeneous grouping of children with varying special needs provides models of appropriate behavior and fosters acceptance of differences.
- A) Classroom membership is open to children with a variety of special needs.
- B) Grouping in classroom activities changes based on individual needs.
- *****
12. Children with special needs may need to be taught certain skills that other children learn through the course of normal development.
- A) The diagnostic-prescriptive approach is used to determine the child's specific needs.
- B) In formulating the IEP, objectives are included to teach skills that children with special needs do not learn automatically.

CASE STUDIES

BOARD OF COOPERATIVE EDUCATIONAL SERVICES
Putnam/Northern Westchester Education Center
Yorktown Heights, New York 10598

BOCES PRESCHOOL HOME TEACHING PROGRAM

CASE DESCRIPTIONS

The cases chosen encompass the range of ages, handicapping conditions and family composition served by the BOCES Home Teaching Program.

E.G. & H.G.

Ms. G. was referred by Child Protective Services 2-1/2 years ago to provide services to E., then 2 years old. He is the third of five children and demonstrated significant developmental delays. Ms. G. was described by the case worker as alcoholic, intellectually limited and emotionally depressed. During the initial home visit, H.G., the fourth child, a 6-month old bi-racial girl, was observed to be lethargic, pallid, lacking eye contact and natural motor responses to her environment. Both children were enrolled in the Home Teaching Program until E.G. was age appropriate for the BOCES Preschool Classroom Program.

Problems included:

- Maintaining Ms. G.'s attention and cooperation throughout home visits
- Ms. G.'s inability to carry out assignments, take care of materials left, and cancelling appointments.
- Older siblings were usually kept home from school.

Progress: E.G. is still attending the BOCES Preschool Classroom Program. H.G. is regularly attending Head Start and is seen weekly by a Home Trainer. Significant changes are evident from this report of a recent home visit:

- All children were up and ready to go to school.
- Ms. G. asked E. what he would be doing in school today.
- Ms. G. reported how well H. was doing in Head Start.
- Ms. G.'s brothers were present at the home visit. One 18-year-old admitted he enjoyed doing H.'s homework with her.
- Ms. G. had the new baby on her lap, was proud of H.'s homework paper and eager to demonstrate how she had been H.'s teacher during the week. She was involved for the entire visit.
- Ms. G. requested that her new baby be enrolled in the Home Teaching Program so that she can do well like H.
- Ms. G. proudly imitated the Home Teacher's methods with the new baby.

SAMPLE 36 (CONT.) CASE STUDIES

BOARD OF COOPERATIVE EDUCATIONAL SERVICES
Putnam/Northern Westchester Education Center
Yorktown Heights, New York 10598

BOCES PRESCHOOL HOME TEACHING PROGRAM

P.F.

P.F., born with Treacher-Collins syndrome, with no outer ears, cleft palate, distorted facial fusion and possible retardation, was referred by a visiting nurse at the age of three months. She was born to young Greek-speaking parents. Home teachers maintained close contact with the Birth Defects Clinic and audiologist involved with P.F.

Problems included:

- establishing a means of communication with the mother who spoke only Greek initially.
- involving the father who spoke some English in the teaching process.
- increasing use of the hearing aids at home.
- overcoming the parents' reluctance to take P.F. out of the house.

Progress: P. is now almost three years old. She communicates with her parents using sign language. She also imitates some sounds and can say a few words. Despite her physical disability, it has been clinically demonstrated that she can hear. She will be enrolled in the BOCES Preschool Classroom Program in September, 1980, to facilitate her social and emotional development with her peers.

SAMPLE 36 (CONT.) CASE STUDIES

BOARD OF COOPERATIVE EDUCATIONAL SERVICES
Putnam/Northern Westchester Education Center
Yorktown Heights, New York 10598

BOCES PRESCHOOL HOME TEACHING PROGRAM

Case History: Home Program

T.M. was referred for screening by his nursery school when he was almost five years old.

Problems included:

- anti-social behavior at school.
- poor peer relationships.
- short attention span.
- inability to participate in group activities.
- running away from home several times and setting fires.

T.M. was accepted in the Home Teaching Program, and the Home Trainer worked with T.M. both at home and at the nursery school. The home trainer participated in small groups with him to facilitate positive interaction with his peers. T.M. participated in the Home Teaching Program for six months.

Progress: After visiting school and home for six months, T.M. was recommended for regular kindergarten with a structured program.

Follow-up with his mother and kindergarten teacher indicates that he is progressing well in all academic and social areas.

FACT SHEET: EVIDENCE OF EFFECTIVENESS

SUMMARY OF MAJOR FINDINGS

The Putnam/Northern Westchester BOCES Preschool Program has been nationally recognized as an effective intervention program. The staff has been trained and the program has been evaluated by the nationally validated Portage Project operated by Cooperative Educational Service Agency 12 at Portage, Wisconsin, who stated in their evaluation: "It is rare to see a preschool program that is as large as yours doing such a thorough job of planning and individualizing, yet keep such a high level of quality in its service".

The program further received national approval and recognition in the preschool field through the receipt of a United States Office of Education Demonstration Grant from 1978 - 1981. These funds allow the program to aid other preschool programs for the handicapped by demonstrating and disseminating exemplary programming, methods and curriculum.

The evaluation of the Regional Demonstration Program for Preschool Handicapped Children conducted during the 1979-80 school year by the Center for Resource Management, Yorktown Heights, New York, provided a third party assessment of the project's unique approach to the early education of the handicapped. Results indicated that all the elements necessary to initiate the program and ensure its effective daily operation were evident and over 60% of staff time was spent in appropriate teaching activities. Staff showed satisfaction with program activities and their personal values seemed consistent with program values.

Parents also held extremely positive views and supported the program through a variety of involvement activities. Over 50% of the parents actually volunteered in classrooms; moreover, the average parent attended at least nine group parent meetings during a typical school year; 99% of the parents responded that they would recommend the program to the parents of other handicapped children.

As compared to national norms, students made statistically significant gains from pre- to posttest in all skill areas measured by the McCathy Scales of Children's Abilities, a widely known standardized test. The gains were educationally significant for these areas (verbal, perceptual-performance, motor and general cognitive) and are directly relevant to the stated program goals and daily curricular activities.

Placement records were extremely positive; 65% of program graduates were placed in regular classrooms or transition programs while only 35% were assigned to special education programs. Follow-up testing with program graduates revealed that the cognitive skill gains made during the 1979-80 school year were maintained by those students who continued to have special intervention services.

Community agencies have noted the effectiveness of the program with children they have referred; letters of commendation have been received from Protective Services, Day Care, Head Start and local nursery schools.

LOG OF REFERRALSSCREENING APPOINTMENT SCHEDULE

	Child's Name	District	County	DOB	Referral
8:30					
9:00					
9:30					
10:00					
10:30					
11:00					
11:30					
12:00					
12:30					

FOLLOW-UP QUESTIONNAIRE (OR CALL) TO AGENCIESTO EVALUATE PRINTED MATERIAL

1. Name of Person _____
2. Professional affiliation _____
3. Date called or interviewed _____
4. Name of person making contact _____

Please rate the following printed material distributed by the preschool program.

Add suggestions for improvements, when relevant. Please answer the following

questions using this code:

- 0 did not read
- 1 do not remember
- 2 slightly useful
- 3 somewhat useful
- 4 considerably useful
- 5 very useful

Please circle the appropriate number:

- | | |
|-------------|------------------------------------|
| 0 1 2 3 4 5 | Preschool Program Flyers |
| | Suggestions for improvements _____ |
| _____ | |
| 0 1 2 3 4 5 | Poster |
| | Suggestions _____ |
| _____ | |
| 0 1 2 3 4 5 | Professional Brochure |
| | Suggestions _____ |
| _____ | |
| 0 1 2 3 4 5 | Program Description |
| | Suggestions _____ |
| _____ | |

SAMPLE 39 (CONT.)
FOLLOW-UP QUESTIONNAIRE (OR CALL) TO AGENCIES
TO EVALUATE PRINTED MATERIAL

0 1 2 3 4 5	Program Rationale Suggestions _____ _____
0 1 2 3 4 5	Curriculum Description Suggestions _____ _____
0 1 2 3 4 5	Client Characteristics Suggestions _____ _____
0 1 2 3 4 5	Case Studies Suggestions _____ _____
0 1 2 3 4 5	Fact Sheet or Evidence of Program Effectiveness Suggestions _____ _____
0 1 2 3 4 5	Business Card Suggestions _____ _____
0 1 2 3 4 5	Visitor Orientation Packet Suggestions _____ _____

Thank you for completing this questionnaire.

PRESCHOOL HANDICAPPED PROGRAM

Agency Questionnaire

Name of Agency: _____ Date: _____

Your Position at Agency: _____

The Center for Resource Management, Inc., is conducting an evaluation of the BOCES Preschool Handicapped Program (PSHP). The basic purpose of the evaluation is to provide a description of how the program is functioning in terms of its efforts to collaborate with other service providers.

Your participation and cooperation with this evaluation effort will give us the opportunity to obtain valuable information from persons who have interacted with the program on a professional basis. This instrument is designed to document your reactions to and perceptions of the Preschool Handicapped Program. All responses will be held in strict confidence. Thank you for your cooperation.

1. How did you first hear of the Preschool Handicapped Program?
(Check the appropriate item.)

____ News article
____ PSHP brochure
____ PSHP staff-initiated contact
____ Referral from colleague
____ Referral from client
____ Other (specify: _____)

2. How long have you had interactions with the Preschool Handicapped Program? (Check the appropriate item.)

____ Less than 1 year
____ 1 to 2 years
____ 2 to 3 years
____ 3 to 4 years
____ More than 4 years

3. What types of involvement or interaction have you had with the Preschool Handicapped Program?

In responding to this item, first, place a check mark in the spaces to the left for all the types of interaction which apply. Second, in the spaces to the right, indicate the type of interaction you engage in with PSHP most frequently by ranking it "1". The second most frequent interaction should be ranked "2," and so on until all the interaction types you originally checked are ranked by frequency of occurrence.

<u>Check all that apply</u>	<u>Types of Interaction</u>	<u>Rank by frequency</u>
☐	Requested information from PSHP	☐
☐	Provided information to PSHP	☐
☐	Referred child/parent to PSHP	☐
☐	Received child/parent referral from PSHP	☐
☐	Participated in case management meetings with PSHP	☐
☐	Participated in area workshops/conferences sponsored by PSHP	☐
☐	Invited PSHP to participate in area workshops/conferences sponsored by your agency	☐
☐	Received training from PSHP staff	☐
☐	Provided training to PSHP staff	☐
☐	Developed services/procedures/policies mutually with PSHP staff	☐
☐	Served on PSHP Advisory Council	☐
☐	Served on Westchester/Putnam Early Childhood Special Needs Coalition	☐
☐	Other (specify: _____)	☐

4. How satisfying has your involvement with PSHP been for you?
(Check the appropriate item.)

☐ Very satisfying
☐ Moderately satisfying
☐ Not at all satisfying

5. How well do you understand the Preschool Handicapped Program?

Please indicate your level of understanding about specific aspects of the Program by circling one number from 1 (low) to 5 (high) for each of the following items.

	LEVEL OF UNDERSTANDING				
	Low				High
a. Philosophy of the program	1	2	3	4	5
b. Goals/purposes of the program	1	2	3	4	5
c. Screening/placement procedures	1	2	3	4	5
d. Staffing patterns within program	1	2	3	4	5
e. Transdisciplinary team assessment	1	2	3	4	5
f. Teaching methods of the program	1	2	3	4	5
g. Parent involvement in the program	1	2	3	4	5
h. Services available from PSHP	1	2	3	4	5

6. How do you perceive the Preschool Handicapped Program in terms of quality?

Please indicate the degree of excellence you perceive for each of the following aspects of the Preschool Handicapped Program by circling one number from 1 (low) to 5 (high) for each item.

	DEGREE OF EXCELLENCE				
	Low				High
a. Staff competence	1	2	3	4	5
b. Staff flexibility	1	2	3	4	5
c. Staff interactions with other agencies	1	2	3	4	5
d. Commitment to handicapped children	1	2	3	4	5
e. Services delivered to handicapped children by PSHP staff	1	2	3	4	5
f. Parent-staff interactions	1	2	3	4	5
g. Services to the community	1	2	3	4	5
h. Accomplishments of the program	1	2	3	4	5
i. PSHP in general	1	2	3	4	5

7. What do you see as the major constraints to more effective collaboration between your agency and PSHP?

8. What do you see as the major benefits resulting from the collaborative efforts between your agency and PSHP?

9. Do you have any suggestions for improving the degree of collaboration between your agency and PSHP?

--THANK YOU AGAIN FOR YOUR COOPERATION--

PRESCHOOL HANDICAPPED PROGRAM

Date: _____

PARENT QUESTIONNAIRE

Center For Resource Management, Inc. is conducting an evaluation of the BOCES Preschool Handicapped Program. The basic purpose of the evaluation is to provide a description of how the program is functioning--its accomplishments, constraints and concerns.

Your cooperation and participation with this evaluation effort will give us the opportunity to obtain valuable information from persons involved with program services.

The attached instrument was designed to document your reactions and perceptions of the Preschool Program. All responses will be held in strict confidence, and only summarized data will be presented in subsequent reports. Your signature is optional, but please supply the following information which will be used for comparison purposes.

1. When was your child first enrolled in the Preschool Program?

(Month) (Year)

2. In which Program was your child first enrolled? (Check One)

____ Classroom Program
____ Home Program

3. In which program is your child presently enrolled? (Check One)

____ Classroom Program
____ Home Program

4. If your child is in the classroom program, please supply the following information:

a) Name of teacher: _____

b) Session child attends: _____
(Morning) (Afternoon)

5. Were you ever a parent volunteer in the classroom program? (Check One)

____ Yes No

SECTION I: Involvement in the Program

The Preschool Handicapped Program (PSHP) has provided various means for parents to become aware of and involved in the program over the past year. This section of the questionnaire addresses itself to the parent involvement activities of the PSHP.

1. From what source did you first learn about the Preschool Handicapped Program? (Check One)

Friend/Other PSHP Parent	_____	Physician	_____
Nursery School	_____	Posters/Flyers	_____
Newspaper/Radio	_____	Other	_____
Social Service Agency	_____		(specify)

2. In the past year, did you participate in any of the following parent meetings/activities? (Check all that apply)

Child Assessment Conferences	_____	IEP Conferences	_____
Classroom Visits/Observations	_____	Other Conferences	_____
Screenings	_____	Classroom Volunteering	_____
Parent Group Meetings	_____	Volunteer Training Program	_____
(Number attended: _____)		Other	_____
			(specify)

3. How effective were these parent meetings/activities in:

(Place a check mark in the appropriate box for each item listed below)

	LEVEL OF EFFECTIVENESS				
	Very	Fairly	Somewhat	Hardly	Not At All
a. helping you understand the Preschool Handicapped Program					
b. helping you understand your child's handicap					
c. improving your attitudes about your child's handicap					
d. increasing your skills in working with your child					
e. giving you moral support as a parent					

SECTION II: Reactions to Program

A. Knowledge

Directions: Please indicate your level of understanding about specific aspects of the Preschool Handicapped Program by circling one number from 1 (low) to 5 (high) for each of the following items.

	LEVEL OF UNDERSTANDING				
	Low				High
1. Philosophy of the program	1	2	3	4	5
2. Goals/purposes of the program	1	2	3	4	5
3. Screening/placement procedures	1	2	3	4	5
4. Transdisciplinary team assessment	1	2	3	4	5
5. Teaching methods of program	1	2	3	4	5
6. Methods for teaching child at home	1	2	3	4	5
7. Methods for managing child's behavior	1	2	3	4	5
8. Legal rights as parents	1	2	3	4	5
9. Educational rights of child	1	2	3	4	5
10. Handicapping condition of child	1	2	3	4	5
11. Services available in community	1	2	3	4	5

B. Attitudes

Directions: Please indicate your level of satisfaction with the Preschool Handicapped Program by circling one number from 1 (low) to 5 (high) for each of the following items.

	LEVEL OF SATISFACTION				
	Low				High
1. Preschool Handicapped Program in general	1	2	3	4	5
2. Instructional methods used	1	2	3	4	5
3. Effectiveness of staff	1	2	3	4	5
4. Frequency of contact with teachers	1	2	3	4	5
5. Materials used	1	2	3	4	5
6. Your involvement with the program	1	2	3	4	5
7. Opportunities for your suggestions	1	2	3	4	5
8. Screening/placement procedures	1	2	3	4	5
9. Methods of monitoring child's progress	1	2	3	4	5
10. Accomplishments of program	1	2	3	4	5

C. Perceived Change in Child

Directions: The Preschool Program is designed to develop your child's skills in the areas listed below. For each area, please check the level of progress your child has made by circling one number from 1 (low) to 5 (high).

	LEVEL OF PROGRESS				
	Low				High
1. Speech and language skills	1	2	3	4	5
2. Physical and motor skills	1	2	3	4	5
3. Social skills	1	2	3	4	5
4. Self-help skills	1	2	3	4	5

SECTION III: Open-Ended Questions

1. What do you see as the major strengths of the Preschool Handicapped Program?

2. What do you see as the major weaknesses of the Preschool Handicapped Program?

3. Would you recommend any changes in the Program? If so, what changes and why?

4. Would you recommend this program to another parent of a preschool handicapped child?
(Please explain your answer.)

Yes

No

THANK YOU FOR YOUR COOPERATION!

Parent Signature

WORKSHOP EVALUATION QUESTIONNAIREPRESCHOOL PROGRAM WORKSHOPWORKSHOP PARTICIPANTS' EVALUATION FORM

DATE _____

WORKSHOP ATTENDED _____

This questionnaire is designed to give our staff feedback regarding this presentation. Please answer the following questions using this code:

- 0 not relevant
- 1 not at all
- 2 slightly
- 3 somewhat
- 4 considerably
- 5 completely

Please circle the appropriate number

0 1 2 3 4 5 Do you feel you understand how the model operates?

Comments: _____

0 1 2 3 4 5 Do you feel you understand the rationale underlying the model?

Comments: _____

0 1 2 3 4 5 Did the trainer(s) demonstrate a thorough knowledge and understanding of the model presented?

Comments: _____

0 1 2 3 4 5 Was the format of the workshop lively and engaging for you?

Comments: _____

0 1 2 3 4 5 Do you feel the handouts contributed to your understanding of the model?

Comments: _____

0 1 2 3 4 5 Did the audio-visual materials enhance your understanding of the model?

Comments: _____

SAMPLE 42 (CONT.) WORKSHOP EVALUATION QUESTIONNAIRE

0 1 2 3 4 5

Did the discussion contribute to your understanding of the model?

Comments: _____

0 1 2 3 4 5

Were your questions answered to your satisfaction?

Comments: _____

0 1 2 3 4 5

Do you feel prepared to apply what you have learned during this workshop?

Comments: _____

What did you like best about the workshop? _____

If you were to attend this workshop again, what would you like to see changed or added? _____

Overall, the presentation was: _____ Excellent, _____ Good, _____ Fair, _____ Poor.

Thank you for participating in the workshop and completing this questionnaire.

The Preschool Staff

MATERIALS EVALUATION QUESTIONNAIRE

	<u>EFFECTIVE</u>	<u>NOT EFFECTIVE</u>	<u>NOT APPROPRIATE</u>
<u>SEARCH:</u>			
Flyer	_____	_____	_____
New Brochure	_____	_____	_____
Program Description	_____	_____	_____
High Risk Characteristics	_____	_____	_____
<u>ASSESSMENT:</u>			
DDST	_____	_____	_____
Language Screening	_____	_____	_____
Bayley	_____	_____	_____
McCarthy	_____	_____	_____
TD Information - Summary Sheets	_____	_____	_____
Parent Questionnaire	_____	_____	_____
IEP	_____	_____	_____
<u>CURRICULUM:</u>			
Portage	_____	_____	_____
Expressive Language Checklist	_____	_____	_____
Receptive Language Checklist	_____	_____	_____
<u>PARENT INFORMATION:</u>			
Behavior Articles	_____	_____	_____
Star Chart	_____	_____	_____
Vacation Trip Suggestions	_____	_____	_____
Parent Meeting Topics for Year	_____	_____	_____
Parent Assessment Form	_____	_____	_____
Follow-Up Data	_____	_____	_____

LETTER TO NURSERY SCHOOLS REGARDING SERVICES AND NEEDS

Dear Colleagues Interested in the Needs of Young Children:

You may have heard about the program by now. The Home Training staff is initiating a formal outreach program in an effort to become acquainted with your staff and the services that you offer young children.

Our total program is designed to service about 120 children placed in one of four classrooms, or in Home Training. A child with special needs is placed in Home Training for the following reasons: 1) Chronological or developmental level is too low for classroom experiences. 2) The child is able to function in a regular preschool setting when support is provided to the staff of the setting and the family by a Home Trainer. 3) The special area of concern involves assisting parents to develop appropriate behavior in the child at home.

Many of you in Day Care Centers, Head Start Centers, private nursery schools, or a special service agency have referred young children to our screening when you had a question about their development. When parents who are not involved with another service or program come in with their child for a screening, they often ask our staff to provide names of schools, child care centers, and any variety of services which would be convenient to their community. Our goal is to become better informed in this area so that we can help them find you.

We also welcome the opportunity to meet you and visit your setting. We are able to offer the following services which may be of interest to you.

1. A professional consultation to assist you in assessing your needs. This could include identifying needs, developing goals, or setting up a referral system. Often this service is initiated by a conference concerning a child referred to the Preschool Program, but who is also attending another preschool program, service or facility.
2. An on-site screening as a staff training experience to support your efforts to develop your own system to meet the specific needs of your children.
3. A mini-workshop for staff or parents on "Parents as Teachers" to include a description of our home program, a demonstration of the Portage Curriculum, and ideas for methods and materials.

Some of you may have already been contacted so that we may observe a child in your setting who is also enrolled in our Home Training Program. I look forward to hearing your feedback on the services offered, and to planning for your requests. For those of you who have never had contact with our program, I hope that you will call soon so that we can establish a working relationship and provide the service that meets your needs.

The Home Training staff looks forward to talking with you and visiting in the near future to coordinate our efforts with yours, so that the young children with special needs in all our communities can benefit from all the services we have to offer.

Sincerely yours,

NEEDS ASSESSMENT FORM (SCHOOL/AGENCY)

Name of Facility _____

Name of Director _____

Please fill out this form to enable our Preschool Program to assess the inservice training needs of your staff.

Organizational Structure - List staff and roles, or use a diagram.

Comment on training, experience or special skills of staff.

Children served - How many? _____ Number of classes _____ Ages _____

Comment on the role of parents.

List most frequent needs expressed by staff.

Sources of basic curriculum _____

Usual procedure for identifying special needs of children _____

SAMPLE 45 (CONT.)
NEEDS ASSESSMENT FORM (SCHOOL/AGENCY)

State main goals of your facility _____

How can the Preschool Program be of service to you?

_____ Staff workshop
_____ On-site Screening
_____ Professional consultation
_____ Observation of a child
_____ Parent meeting

Other _____

Home Training Satisfaction

Please check degree of satisfaction.

High Med. Low

Weekly home visits _____
 Teaching own child _____
 Family involvement _____
 Instructional materials used _____
 Printed materials shared _____
 Coordination with other services _____
 Rate of your child's progress _____
 Assessment procedures. _____
 I.E.P. - Parent-Teacher planning _____
 Methods of Home-Trainer _____
 Other - _____

Would you be interested in attending parent meetings? Yes _____ No _____

Would you attend if transportation were provided? Yes _____ No _____

Comments welcome - _____

Please list -

Other interests:

Other needs:

Comments on survey:

Please return form to:

Jacquelyn O. Jones

Preschool Home-Training Program

BOCES

Yorktown Heights, N.Y. 10598

(914) 245-2700 Ext. 394

A Survey of Preschooler's Parents in Home-Training



your community:

Awareness

Interests

Needs

Preschoolers' Parent Survey

The BOCES Home-Training Program wishes to learn about the interests and needs of our parents, so that we may provide useful information to you.

This questionnaire is designed to find:

1. What you know
2. How you learned it
3. What information you need
4. What services interest you
5. Your feedback on home-training

Would you please complete the following so that the information you desire can be organized in the most useful manner.

Parent's Name _____

Address _____

School District _____

County _____

Names of Children _____ Age _____

Phone _____

Any special facts or conditions which affect status of my family - _____

Awareness

My experience includes: (Please check)

- * One or more meetings with a teacher in the last year. _____
- * A tour through my local school in the last year. _____
- * A PTA meeting in the past year. _____
- * Talks with informed parents. _____
- * Reading school bulletins. _____
- * Volunteering my service in a local school. _____
- * Attending a parent group in the last year. _____
- * Investigating Preschool Programs in my community. _____
- * Being a leader for a youth group. _____
- * Investigating the services of the Dept. of Social Services. _____
- * Talks with neighborhood kids. _____
- * Feedback from my other child or children in school. _____
- * Attending School Board meetings. _____
- * Reading a local newspaper once a week. _____
- * Listening to a local radio station once a day. _____
- * Frequent use of the local recreational facilities. _____
- * Knowledge of the leaders in my community. _____
- * Leading a local adult group. _____
- * A regular job in this community. _____
- * Attending a religious service regularly. _____
- * Other - _____

* Other - _____

Interests and Needs

I want to know more about: (Check)

- * Parent centers. _____
- * Adult library programs. _____
- * Children's library programs. _____
- * Health care services. _____
- * Recreational activities. _____
- * Social Services available. _____
- * Child care centers. _____
- * Preschool education. _____
- * Special Education Services. _____
- * My local school. _____
- * Local shopping for food, clothes, toys. _____
- * Job Training programs. _____
- * Food stamps. _____
- * Planned Parenthood. _____
- * Single Parent Groups. _____
- * How to discipline my child. _____
- * Interesting day trips. _____
- * Vacations for families. _____
- * Marriage counseling. _____
- * Diet and nutrition. _____
- * Readiness skills needed for kindergarten. _____
- * How to start a play group. _____
- * Local transportation. _____
- * Pets for children. _____
- * Gifts for children. _____
- * Parties for children. _____
- * How to find a baby-sitter. _____
- * Understanding senior citizens. _____
- * Legal Aid. _____
- * Alcoholics Anonymous. _____
- * Drug addiction. _____
- * Handling problems with a landlord. _____
- * Other - _____

* Other - _____

PARENT AWARENESS WORKSHOP

You are needed at a PRESCHOOL H-A-P-P-E-N-I-N-G

Date: April 16, 1980

Time: 3:00 - 4:45 P.M.

Place: Front Conference Room, School Services Building
BOCES, Yorktown Heights, New York 10598

Purposes:

1. The BOCES Preschool Program staff wish to answer the frequent questions which have resulted from the referrals many of you have made for children to be screened.
2. We wish to hear your questions and comments so that we may plan our services to meet the needs you have expressed.
3. We wish to provide the opportunity for preschool facilities in our area to become better acquainted.

Agenda:

1. Introduction of BOCES Staff present.
2. Changes in the BOCES Preschool Program. Topics such as local funding, criteria for entry into the program, and the need to label children to obtain services will be discussed by the Project Coordinator.
3. What is a Screening? A psychologist and speech pathologist will describe the screening procedure.
4. Procedures with Parents. A social worker will describe a parent interview and the need for parent cooperation.
5. New services that are available. A director of a Day Care Center and a director of a nursery school will describe their use of the Outreach Services offered by the Home Teaching Program.
6. Introduction of Facilities Represented.
7. Question and Comment Period.
8. Written Evaluation and Feedback for Planning Future Meetings.

Please Bring:

- * Your questions about the BOCES Preschool Program.
- * Ideas for future preschool meetings. Perhaps this could be an annual event!
- * Printed information about your facility.

SAMPLE 47 (CONT.)
PARENT AWARENESS WORKSHOP

The Preschool HAPPENING will not be the same without YOU. Please arrive promptly at 3:00.

AGENDA: Preschool HAPPENING - April 16, 1980 - 3:00 to 4:45 P.M.

- 3:00 - 3:10 Welcome. Introduction of BOCES staff.
- 3:10 - 3:15 Why call for a screening?
* See list of characteristics of a preschool child.
* See child observation comment form.
- 3:15 - 3:40 What happens at a screening?
- Parent Interview. Social Worker
* See Parent Questionnaire.
- Speech and Language Screening. Speech Pathologist
* See Speech and Language Screening form.
- Denver Developmental Screening Test. Psychologist.
* See Denver score sheet.
- 3:40 - 3:45 Results of the screening
* See Criteria for Entry.
- 3:45 - 4:05 Sharing of Experiences. Representatives from local preschool facilities who have utilized BOCES services will each present a brief description of the concerns they had about a child, and a description of the services received and the results.
- Day Care Center - Director
- Nursery School - Director
- Early Childhood Learning Center - Co-Directors
- Cooperative Nursery School - Director
- 4:05 - 4:20 Changes in the BOCES Preschool Program
- Growth and scope of the program.
- Source of funding. *See HC 2-1 form.
- Use of labels for children. *See description of handicapping condition.
- Concerns of parents, doctors and other professionals.
- 4:20 - 4:30 Open Forum. Questions, comments and suggestions for the future.
- 4:30 - 4:45 Closure Activities.
- Complete Evaluation form. please
- Read name tags and become acquainted with some new people.
- Gather printed information from other programs.